24

25 CHAYTOR, Q.C.:

A. I'm not aware of any shared drive between the

Department and the Executive Council.

May 27, 2008	Multi-P	Page TM	Inquiry on Hormone Receptor Testing
	Page 5		Page 7
1 Q. Okay, and I think when w	ve left then, we were	1	changes because he would either speak to me
2 following up as to your fi		2	directly about it. He would send them back,
3 that you're involved in o	_	3	you know, with a handwritten note on it, but
4 matter, and I believe that			there were some occasions when the changes
5 was prepared October 3rd	_	5	were made by my secretary, like if I didn't
6 MS. HENNESSEY:	6	6	happen to be there. He may have sent a few
7 A. Yes.		7	changes back and they would have been made.
8 CHAYTOR, Q.C.:	8		Now she did her best to keep be advised of
9 Q. And if we could look at I			those changes.
is the briefing note from I	-	O CHA	YTOR, Q.C.:
11 you received on September			Yes. Now who wouldwhat was the purpose, I
12 MS. HENNESSEY:	12		guess, of this briefing note? Where was it to
13 A. Right.	13		ultimately end up?
14 CHAYTOR, Q.C.:			HENNESSEY:
15 Q. And it's basically a page			This briefing note, my understanding was that
second page. Ms. Hennes	_		it was a note that would have been provided to
briefing note from Eastern			the Minister and then providedthis was a
the drafting of your briefic			note that was requested by Cabinet
19 3rd?			Secretariat.
20 MS. HENNESSEY:			YTOR, Q.C.:
21 A. Yes, I did.	21		Okay. Well, I think it's a similar note which
22 CHAYTOR, Q.C.:	22		is done two days later, October 5th, for
23 Q. And if we look then, ple			Cabinet Secretariat.
24 four.	~ ~		HENNESSEY:
25 MS. HENNESSEY:	25		The note on October 5th is Cabinet
23 W.S. HENNESSE I.		J A.	
	Page 6		Page 8
1 A. Yes.		_	Secretariat's version of this note.
2 CHAYTOR, Q.C.:			YTOR, Q.C.:
3 Q. And is this the briefing	*		Yes, of this note.
4 prepared that day?			HENNESSEY:
5 MS. HENNESSEY:	5		Yes.
6 A. Yes, it is.			YTOR, Q.C.:
7 CHAYTOR, Q.C.:	7		Which is mainly the content is the same.
8 Q. Okay, if we scroll down to			HENNESSEY:
9 that it's prepared by Mo	-		Yes.
approved by John Abbott.			YTOR, Q.C.:
that you've prepared it a			Okay. So would the Department not have
12 approved it?	12		prepared a briefing note if Cabinet
13 MS. HENNESSEY:	13		Secretariat hadn't requested one?
14 A. I would have prepared			HENNESSEY:
briefing note. The note w	-		I would think at this point in time, there
Mr. Abbott. He may mak			would have been a briefing note done, but I do
17 note would come back to	-		know that the note was requested by Cabinet
actual typing of the chang			Secretariat.
19 CHAYTOR, Q.C.:			YTOR, Q.C.:
20 Q. Okay. So if Mr. Abbott 1	, ,		Yes, and the trigger for the briefing note at
21 to the note, you would be			this point in time, I take it, was the story
you would actually then	have to do the		becoming public?
las abanasas	120	2 1 AC T	IENNIEGGEN

23 MS. HENNESSEY:

25 THE COMMISSIONER:

A. Yes, it would have been.

24

A. For the most part, I would be aware of the

23

changes?

24 MS. HENNESSEY:

M	ay 27, 2008 Mu	lti-P	age	Inquiry on Hormone Receptor Testing
	Page	9		Page 11
1		1	. A	Yes.
2		2	CH/	AYTOR, Q.C.:
3	MS. HENNESSEY:	3	ζ	So I take it you relied on the September 30th
4	A. Oh, sorry.	4		briefing note from Eastern Health?
5	THE COMMISSIONER:	5	MS.	HENNESSEY:
6	Q. No, that's quite all right. When this note	6	j A	Yes, I would have relied on that note. There
7	was prepared, it was prepared because youas	7	1	was a change in the fourth paragraph. I did,
8	I understand what you're saying is that even	8	}	in the original draft have information in with
9	if there had not been a request for a briefing	9)	respect to the equipment in that there was a
10	note in the circumstances, what had occurred	10)	the company was recommending additional
11	over the few days prior to this, you likely	11		preventive maintenance.
12	would have prepared one in any event?	12	CHA	AYTOR, Q.C.:
13	MS. HENNESSEY:	13	Ç	Yes, so you're talking about the Ventana
14	, ζ	14	ļ	visit?
15	prepared one for the Minister at that time.	15		HENNESSEY:
16		16		. Yes.
17		17		AYTOR, Q.C.:
18		18		Or the visit from the Ventana representative?
19		19		HENNESSEY:
1	MS. HENNESSEY:	20		. Yeah.
21	,			AYTOR, Q.C.:
1	THE COMMISSIONER:	22		And you changed that then in your briefing
23		23		note. So if we go back to 0124, page four,
1	CHAYTOR, Q.C.:	24		there we go. So you've indicated here "in
25	Q. And I understood that, from your answer, to be	25	1	their written report, they stated they found
	Page 1	0		Page 12
1	, and the second	1		the system to be operating as expected and
2	1 1	2	2	that the procedures used by technicians were
3	concern?	3	;	appropriate and as trained." Did you see that
4	MS. HENNESSEY:	4	ļ	written report from Ventana?
5	,	5		HENNESSEY:
6	1 1	6		. No, I did not.
7	i ,	7		YTOR, Q.C.:
8		8		. You didn't have that at your disposal?
9	,			HENNESSEY:
10	1	10		No.
111				YTOR, Q.C.:
12		12		. And whose information, where would you have
13	*	13		gotten that information?
14	· •			HENNESSEY: This information would have been from Festern
15		15		This information would have been from Eastern
16		16		Health and as I said, there was a statement in
17		17		my original draft of this note, I did have a reference to the need for additional
18 19	· · · · · · · · · · · · · · · · · · ·	18 19		preventive maintenance.
20	_			YTOR, Q.C.:
21		20		Y Yor, Q.C.: Yes, and if we look then at what other
	And if we go back for a moment to 0141, we see	21	. (. 105, and it we fook then at what other

23

24

25

information you had at your disposal, for

example, did you have the July 20th 2005

briefing note? Did you have that available to

you in preparing this?

similar, in terms of the wording.

the second paragraph "in 2005, a patient

initially tested" and it's basically quite

22

23

24

25 MS. HENNESSEY:

May 27, 2008 Page 13 Page 15 -or at least the Department knew September 1 MS. HENNESSEY: A. I think the note came to me sometime in 2 30th that this was going to break, and I appreciate you've told us that you weren't in September. I don't recall exactly, but I 3 3 would have used the September 30th note to your office. But others certainly knew that 4 4 prepare the October 3rd note. this issue was going to break on the Friday, 5 5 6 CHAYTOR, Q.C.: and the briefing note was forwarded over on 6 Friday from the Department, and I believe you Q. So you would have had that, the July 20th 7 7 8 note, as well as the information forwarded on 8 also received a version of it by e-mail from September 30th from Eastern Health? Tansy, so I take it Tansy had received it as 9 10 MS. HENNESSEY: 10 well. A. Yeah. 11 MS. HENNESSEY: 11 12 CHAYTOR, Q.C.: 12 A. Yes. Q. And then, of course, you also had your meeting 13 CHAYTOR, O.C.: with Dr. Williams and Mr. Tilley? Q. But there wasn't any efforts over the weekend 14 14 to try and get together a briefing note? 15 MS. HENNESSEY: 15 A. Yes. 16 MS. HENNESSEY: 16 A. I wasn't involved in the file that weekend. 17 CHAYTOR, Q.C.: 17 Q. On the same day that you prepared the note? 18 CHAYTOR, O.C.: 19 MS. HENNESSEY: Q. The issue about Dr. Ejeckam then, that doesn't appear then--it doesn't get carried forward in 20 A. Right. 20 any of the briefing notes. Is that correct? 21 CHAYTOR, Q.C.: 21 22 Q. October 3rd. The July 20th 2005 briefing note 22 MS. HENNESSEY: referred to the issue, the 2003 issue, which 23 23 A. That's not referenced in our briefing notes to was identified by Dr. Ejeckam. the Minister. 24 24 25 MS. HENNESSEY: 25 CHAYTOR, Q.C.: Page 14 Page 16 Q. If we could look, please, at 1436, and these A. Yes. 1 1 2 CHAYTOR, O.C.: 2 were your notes we looked at yesterday from the meeting October 3rd 2005 with Dr. 3 Q. But that's not carried forward in the October 3 Williams, Mr. Abbott, and Mr. Tilley, and 3rd briefing note. Can you explain why? 4 4

5 there's some numbers recorded here, "142 of

327 slides have been read and there's 35 6

7 conversions, represents about ten percent of

patients with potential for error." And I 8

understood from your evidence yesterday, 9

that's Dr. Williams providing that 10

11 information?

12 MS. HENNESSEY:

A. Yes, that's my recall.

14 CHAYTOR, Q.C.:

Q. And do you recall or was there any question 15

asked as to how was that ten percent 16

17 calculated?

18 MS. HENNESSEY:

A. I don't recall. I can remember looking at the 19

numbers, the 142 slides had been read and that 20

the 35--there were 35 conversions, which is a 21

higher percentage than ten percent. 22

23 CHAYTOR, Q.C.:

24 Q. Yes, that's right, okay. But there was no 25 question raised or asked of Dr. Williams at

5 MS. HENNESSEY:

A. Ms. Chaytor, I would have used--because of the 6

7 tight time frame I was under in getting this

note done that morning, I would have relied on

9 the most recent note that I had from Eastern

10 Health.

11 CHAYTOR, Q.C.:

8

12 Q. Yes, but the issue of--or the fact that some

13 issue having arisen in 2003, do you think that

14 would be an important fact to bring to the

attention to the Minister and carry forward in 15

the Minister's briefing notes? 16

17 MS. HENNESSEY:

18 A. In hindsight, I perhaps should have included

that in this, but because of the time factor, 19

20 I know I had a very short period of time to

21 prepare this briefing note, that I relied on

the most recent information that I had from

23 Eastern Health.

24 CHAYTOR, O.C.:

22

Q. And on that point, Ms. Hennessey, you knew on-25

May 27, 2008	Multi-rage inquiry on normone Receptor Testing
	Page 17 Page 19
that time regarding that figure?	1 Health.
2 MS. HENNESSEY:	2 CHAYTOR, Q.C.:
3 A. I don't recall specifically asking a quest	on 3 Q. So Dr. Williams, in the meeting, didn't have
4 that morning.	4 any written documentation that he was relying
5 CHAYTOR, Q.C.:	5 on when giving you those numbers?
6 Q. Okay, and if we just look back then to	your 6 MS. HENNESSEY:
7 briefing note, back to 0124, page for	r, 7 A. I don't recall him having a piece of paper
8 please, and under current status, you h	ave 8 with numbers on it, so I did rely on theI
9 included numbers.	9 mean, 147 and 153, it's not a big difference,
10 MS. HENNESSEY:	and the 147 may have been the most recent
11 A. Yes.	information that he had at hand, but I did
12 CHAYTOR, Q.C.:	rely on the written information from Eastern
13 Q. And you'll see that the numbers that	are 13 Health.
included here, you write "Eastern Healt	h has 14 CHAYTOR, Q.C.:
collected and sent all negative samples	from 15 Q. And 73 having been reviewed, the numbers that
16 1994 to 2004 for the St. John's hospitals	for are different however though, it's 153 samples
retesting to Mount Sinai. 323 samp	les 17 have been reported, whereas he indicated that
reported as weakly positive to negative	have 18 142 of 327 slides have been read, and this is
been sent." So that number is the same	the saying here that 73 have been reviewed and 16
20 323 have been sent, and then "to date,	to 20 with changes. So did you question Dr.
samples have been reported by Mount S	· · · · · · · · · · · · · · · · · · ·
have been reviewed and it appears tha	
those, there are 16 to 20 individuals w	
treatment could be impacted" and then	
look back to 0141, this is the briefing n	ote 25 MS. HENNESSEY:
	Page 18 Page 20
again which was sent to you on Septemb	
2 from Eastern Health, those are the figure	
3 that are included there.	3 preparing the briefing note that I spoke to
4 MS. HENNESSEY:	4 the Deputy Minister about the data and it was-
5 A. Yes.	5 -the response that I got was to accept the
6 CHAYTOR, Q.C.:	6 numbers that Eastern Health was providing. So
7 Q. 323, 153 samples have been reported. 7	
8 been reviewed and it appears 16 to 20	
9 converted. So obviously you took th	
numbers from the briefing note that	
provided to you on September 30th, but	
figures aren't the same as what Dr. Wil	
gave you on October the 3rd.	13 A. Yes.
14 MS. HENNESSEY:	14 CHAYTOR, Q.C.:
15 A. No.	Q. And Mr. Abbott asked you to accept the numbers
16 CHAYTOR, Q.C.:	that Eastern Health was providing?
17 Q. Did that catch your attention?	17 MS. HENNESSEY:
18 MS. HENNESSEY:	18 A. Yes.
19 A. Yes, it did and I did rely on the information	
because Dr. Williams, if I recall correct	
wasn't reading from, you know, a set information that he had in front of him,	
1	
he was, you know, quoting the numbers	
he could recall them at that time, so I d	id 24 A. Ms. Chaytor, I don't recall all the details

around that. I know it was in what I call the

rely on the written information from Eastern

7

					1 agc
Minister's	suite area.	It wasn't	in	his	

- 2 office, but I do recall him telling me to
- accept the numbers that Eastern Health 3
- provided, that they are their numbers. 4
- 5 CHAYTOR, Q.C.:
- Q. And did you understand that to be on a general 6
- go-forward basis or just with respect to this 7
- 8 particular briefing note?
- 9 MS. HENNESSEY:
- A. I understood that to be on a go-forward basis, 10
- so as we moved through the file, I accepted 11
- 12 numbers.
- 13 CHAYTOR, O.C.:
- Q. So whatever numbers were presented to you by 14
- Eastern Health, you accepted them? 15
- 16 MS. HENNESSEY:
- A. Yes, I did. 17
- 18 CHAYTOR, Q.C.:
- Q. And you understood that to be on the
- instruction from Mr. Abbott? 20
- 21 MS. HENNESSEY:
- 22 A. Yes, I did.
- 23 CHAYTOR, Q.C.:
- Q. And I think we will come to one point in time 24
- where you do do your own calculation and come 25

- up with a different number, and we'll talk 1
- about that. 2
- 3 MS. HENNESSEY:
- A. I did.
- 5 CHAYTOR, Q.C.:
- Q. Yes, later on.
- 7 MS. HENNESSEY:
- A. I think late I did do one or two calculations.
- 9 CHAYTOR, Q.C.:
- o. Yes. 10
- 11 MS. HENNESSEY:
- A. I wasn't keen on doing calculations, because I 12
- had been given direction to accept the numbers 13
- as presented by Eastern Health. 14
- 15 CHAYTOR, Q.C.:
- O. Okay, and that was clear direction from Mr. 16
- 17 Abbott?
- 18 MS. HENNESSEY:
- 19 A. Yes, it was.
- 20 CHAYTOR, O.C.:
- 21 O. And -
- 22 MS. HENNESSEY:
- A. And it was in October. It was around this 23
- 24 note.
- 25 CHAYTOR, Q.C.:

- Q. And did you have any discussion with Mr.

Page 23

Page 24

- 2 Abbott on that or you just accepted what he
- instructed you to do? 3
- 4 MS. HENNESSEY:
- 5 A. I accepted what Mr. Abbott instructed me to
- do. I worked very well with Mr. Abbott, but 6
 - when he took a position on files, I didn't
- 8 question his position.
- 9 THE COMMISSIONER:
- Q. Just a point of clarification. When you say 10
- you were instructed by Mr. Abbott to accept 11
- the numbers that Eastern Health was providing 12
- 13
- 14 MS. HENNESSEY:
- A. Yes. 15
- 16 THE COMMISSIONER:
- Q. I'm interpreting that to mean that you 17
- accept the latest version of the numbers. So 18
- 19 if the numbers that Eastern Health provided to
- you changed over time, you would accept the 20
- latest figure that came from Eastern Health? 21
- 22 Is that right?
- 23 MS. HENNESSEY:
- 24 A. Yes, Commissioner, that was the information
- when I was told to accept the numbers provided 25
- Page 22
 - by Eastern Health. We did the best we could 1
 - 2 to move the numbers out of any information
 - that came to us into our briefing notes. 3
 - 4 CHAYTOR, O.C.:
 - Q. Yes. And in this particular case, however, 5
 - though, the latest numbers came from Dr. 6
 - Williams? 7
 - 8 MS. HENNESSEY:
 - A. Yes.
 - 10 CHAYTOR, Q.C.:
 - 11 Q. And you didn't use those numbers, you used
 - what was written in the briefing note? 12
 - 13 MS. HENNESSEY:
 - A. Yes, I did. 14
 - 15 CHAYTOR, Q.C.:
 - Q. Did it cause you or the deputy minister any 16
 - concern as to the reliability of the 17
 - information you were receiving from Eastern 18
 - Health when you compared that there were--that 19
 - there was a discrepancy in the numbers you 20
 - were getting this early? 21
 - 22 MS. HENNESSEY:

- A. I don't recall specifically. It was an 23
- unusual approach because most of the files 24
 - that I have, when I have numbers come to me, I

May 27, 2008	Multi-	-Page TM	Inquiry on Hormone Receptor Testing
	Page 25		Page 2
do do some analysis arou		1	ER/PR testing across Canada; and that they
2 I accepted the direction	provided by the	2	were doing some, they were sending some test
deputy minister and I rep	ported the numbers.	3	results to Montreal; and that they werethey
4 Now, I'm not saying I d	id a perfect job in	4	had set up a tumor panel.
5 reporting numbers, and I	mean, some of the	5 CHAY	TOR, Q.C.:
6 notes I prepared myself a	and some notes were	6 Q.	Yes.
7 prepared by staff who we	ork with me, but the	7 MS. H	ENNESSEY:
general premise on which	ch we worked was to	8 A.	To begin the review of test results when they
9 accept the numbers provi			came back from Mount Sinai. So as you know,
10 CHAYTOR, Q.C.:	· · · · · · · · · · · · · · · · · · ·		this file was an operational matter for
11 Q. Yes. And, Ms. Hennesse	y, I want to be fair to		Eastern Health. We did have some involvement
you on that. So I'm sensing	•	12	at key points in the file, but we weren't
say it was an unusual app			involved, you knowevery week -
14 ADM?			TOR, Q.C.:
15 MS. HENNESSEY:			Yes, I understand that.
16 A. Yes.			ENNESSEY:
17 CHAYTOR, Q.C.:		17 A.	- in Eastern Health we certainly got updates
18 Q. I take it you were used to	doing some analysis		from Eastern Health as we moved along through
19 yourself and not just re			the file.
20 repeating information?		20 CHAY	TOR, Q.C.:
21 MS. HENNESSEY:			Yes, and I'm just, in terms of, because you
22 A. Right, yeah.			are involved then in preparing other briefing
23 CHAYTOR, Q.C.:			notes.
24 Q. And this was unusual for	vou to be asked to		ENNESSEY:
25 just accept information	-		Yes.
J 1	Page 26		Page 28
1 without that analysis?	1 uge 20	1 CHAY	TOR, Q.C.:
2 MS. HENNESSEY:			And I'm wondering if your approach, then,
1	ach I mean I was		carried through in terms of accepting whatever
4 given clear direction to a			information was provided by Eastern Health and
5 and report them, that the	-		using that to formulate the briefing notes?
6 Health's numbers. But	· ·		ENNESSEY:
7 question, that on most of	-		For the most part we would have relied on
8 have done some analysis.	-		information from Eastern Health to prepare our
9 CHAYTOR, Q.C.:			briefing notes. Now, I might add to that
	rther than just the		comment that, you know, there were different
	7		staff involved in this file. For the most
1	-	11	
that to be whatever info	mination was being	12	part, the regional consultant prepared the

14

15

16

17

18

19

20

25

that to be whatever information was being forwarded to you by Eastern Health to accept, 13 14 was it more than just the numbers, was it the 15 overall information on this file?

16 MS. HENNESSEY: 17 A. The specific conversation was around the 18 numbers. With respect, as we moved through 19 the file, I had accepted--I mean, we felt comfortable at the start of this file that 20 21 Eastern Health had put measures in place. 22 They had stopped the testing in St. John's; 23 they moved to retesting at Mount Sinai and to 24 send new cases to Mount Sinai; they were doing 25 some research into what was happening with

part, the regional consultant prepared the notes and staff are under, at times, under considerable pressure when these notes are being done, to turn them around pretty quickly. So whether, you know, we may have misinterpreted some information along the way, that could have happened. We certainly do our

best to try and record the information as accurately as we can. But we, you know, we

21 don't--we didn't operate in a perfect world 22 and we were dealing with a number of other

briefing notes besides this one. I know that 23 24 particular file, I was dealing with briefing

notes on 27 different files.

Page 25 - Page 28

	1. 7
Page 29	Page 31
1 CHAYTOR, Q.C.:	abinet secretariat clarifying questions that
2 Q. Yes, okay. And we appreciate that. 2 c	ome up in the minds of those who do the
3 COMMISSIONER: 3 a	nalysis within that division and adding or
4 Q. Sorry, Ms. Chaytor, can I justyou're 4 a	re cabinet secretariat takingor is cabinet
5 describing a process, and I want to understand 5 s	ecretariat taking your briefing note and
6 how the process works, perhaps other witnesses 6 r	eworking it from a different perspective?
7 have said the same thing, from your 7 V	What's their role with your briefing note, I
8 perspective. When, as in this case, the issue 8 s	uppose, is what I'm asking?
	NNESSEY:
the regional health authority provides 10 A. C	Cabinet secretariat does not rework, no, do a
11 briefing note?	eworking of our briefing note.
12 MS. HENNESSEY: 12 COMMI	SSIONER:
13 A. No, not necessarily. In this particular 13 Q. C	Okay.
situation the regional health authority did 14 MS. HE	NNESSEY:
	Our briefing note would go to cabinet
	ecretariat. They would review it from what
· · · · · · · · · · · · · · · · · · ·	hey call their lens, whichand they may come
	ack to the department and ask for some
1	larification or some additional information.
20 A. They're wouldn't have provided the briefing 20 T	They would incorporate that information into
	he briefing note.
22 authority to get information to develop 22 COMMI	
	Okay.
24 COMMISSIONER: 24 MS. HEI	•
25 Q. Okay. So in this case you had the advantage 25 A. I	n some situations the notes do come back to
Page 30	Page 32
	he department and in other situations they
	nay not always come back.
3 briefing note? 3 COMMI	· ·
	All right, thank you.
5 A. Yes, in this particular situation. 5 CHAYT	
1	Okay, Ms. Hennessey, if we look at 0124, page
	, please? Continuing on under "Current
	tatus" this is your briefing note.
9 cabinet secretariat? 9 MS. HE	NNESSEY:
10 MC HENNIEGEN.	
10 MS. HENNESSEY: 10 A. F	Right.
10 MS. HENNESSET: 10 A. F	_
11 A. Yes.	_
11 A. Yes. 11 CHAYT 12 COMMISSIONER: 12 Q. N	OR, Q.C.:
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 11 CHAYT 12 Q. M 13 to	OR, Q.C.: Now the first bullet that I just pointed you
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 11 CHAYT 12 Q. N 13 to	OR, Q.C.: Now the first bullet that I just pointed you o indicates that Eastern Health had collected
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 11 CHAYT 12 Q. N 13 to	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals.
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 11 CHAYT 12 Q. N 13 to 14 MS. HENNESSEY: 14 a 15 h 16 MS. HER	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals.
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 11 CHAYT 12 Q. N 13 to 14 MS. HENNESSEY: 14 as 15 h 16 MS. HEI	OR, Q.C.: Now the first bullet that I just pointed you o indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah.
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 18 CHAYT	OR, Q.C.: Now the first bullet that I just pointed you o indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah.
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 19 then they would make any changes that they 11 CHAYT 12 Q. N 13 to 14 a 15 h 16 MS. HEI 17 A. N 18 CHAYT 19 Q. A	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah. OR, Q.C.:
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 19 then they would make any changes that they 20 wish to make in the original briefing note 21 that we sent. 11 CHAYT 12 Q. N 13 to 14 a 15 h 16 MS. HEI 17 A. N 18 CHAYT 19 Q. A 20 wish to make in the original briefing note 20 list 21 co	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah. OR, Q.C.: And then the second bullet indicates aboratory directors in the province were ontacted over the past few months to submit
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 19 then they would make any changes that they 20 wish to make in the original briefing note 21 that we sent. 22 COMMISSIONER: 11 CHAYT 12 Q. N 13 to 14 a 15 h 16 MS. HEI 17 A. Y 19 Q. A 20 E 21 that we sent. 21 c 22 a	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's hospitals. NNESSEY: Yeah. OR, Q.C.: And then the second bullet indicates aboratory directors in the province were ontacted over the past few months to submit II negative ER and PR reports and samples for
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 19 then they would make any changes that they 20 wish to make in the original briefing note 21 that we sent. 22 COMMISSIONER: 23 Q. Okay. Well, I suppose that really comes down 21 that we send. 22 down to make in the original briefing note 23 that we send. 24 down to make in the original briefing note 25 down to make in the original briefing note 26 down to make in the original briefing note 27 down the make in the original briefing note 28 down the make in the original briefing note 29 down the make in the original briefing note 20 down the make in the original briefing note 21 down the make in the original briefing note 22 down the make in the original briefing note 23 down the make in the original briefing note 29 down the make in the original briefing note 20 down the make in the original briefing note 21 down the make in the original briefing note 22 down the make in the original briefing note 23 down the make in the original briefing note 24 down the make in the original briefing note 29 down the make in the original briefing note 20 down the make in the original briefing note 21 down the make in the original briefing note 22 down the make in the original briefing note 23 down the make in the original briefing note 24 down the make in the original briefing note 29 down the make in the original briefing note 20 down the make in the original briefing note 21 down the make in the original briefing note 22 down the make in the original briefing note 24 down the make in the original briefing note 25 down the make in the original briefing note 26 down the make in the original briefing note 27 down the make in the original briefing note 28 down the make in the original briefing note 39 down the make in the original briefing	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah. OR, Q.C.: And then the second bullet indicates aboratory directors in the province were ontacted over the past few months to submit Il negative ER and PR reports and samples for the same time period for retesting to Eastern
11 A. Yes. 12 COMMISSIONER: 13 Q. Who would, in turn, prepare a briefing note? 14 MS. HENNESSEY: 15 A. Cabinet secretariat, if we provided a briefing 16 note to the cabinet secretariat, they would 17 review the briefing note, they may call back 18 to the department and ask some questions, and 19 then they would make any changes that they 20 wish to make in the original briefing note 21 that we sent. 22 COMMISSIONER: 23 Q. Okay. Well, I suppose that really comes down 24 to my point. Do you see what happens in 26 In CHAYT 27 CHAYT 28 CHAYT 29 Q. A. Y. Y. A. Y. A. Y. Y. Y. A. Y.	OR, Q.C.: Now the first bullet that I just pointed you to indicates that Eastern Health had collected and sent the samples for the St. John's cospitals. NNESSEY: Yeah. OR, Q.C.: And then the second bullet indicates aboratory directors in the province were ontacted over the past few months to submit II negative ER and PR reports and samples for

May 27, 2008	Multi-	-Page Image Inquiry on Hormone Receptor Testing
	Page 33	Page 35
1 now, well, I guess if you c		1 MS. HENNESSEY:
2 as happening in April and	not May, it's almost	2 A. Yes.
3 six months since the index	case conversion and	3 CHAYTOR, Q.C.:
4 it's certainly five months	s since Eastern	4 Q. Did anyone come back to you and discuss that
5 Health launched the review	v that's under way.	5 as a concern about how long this process is
6 Three months since the de	partment became -	6 taking and how little progress appears to have
7 MS. HENNESSEY:		been made up to this point in time?
8 A. Yes.		8 MS. HENNESSEY:
9 CHAYTOR, Q.C.:		9 A. I don't recall whether anyone spoke to me
10 Q aware back in July. And	when we look at the	specifically about it. I can remember, you
first bullet and accepting the	hose numbers, only	know, getting concern from the patients'
73 cases have been review	ed. It appears none	perspective, myself, that the retesting was
of those patients are yet co	ontacted because in	taking longer than anticipated at Mount Sinai.
14 your fourth bullet it outlin	nes the plan of	14 CHAYTOR, Q.C.:
sending letters, "is also se	nding letters to	15 Q. And did you have discussions with Mr. Abbott
the surgeons and attending	physicians on the	or anyone else in the department about your
17 16th, 20 individuals whose	e treatment could be	17 concern?
18 impacted."]	18 MS. HENNESSEY:
19 MS. HENNESSEY:		19 A. I think we may have spoke about it briefly,
20 A. Is this -	2	but I can't recall the details around it so I
21 CHAYTOR, Q.C.:	2	don't want to say for sure that we did discuss
22 Q. Was this time frame of	concern to the	it. I know I did see -
23 department?	2	23 CHAYTOR, Q.C.:
24 MS. HENNESSEY:	2	24 Q. And did Mr. Abbott appear to share your
25 A. Yes, it was becoming of s	ome concern because	25 concern?
	Page 34	Page 36
1 we understood initially th	-	1 MS. HENNESSEY:
will be done by Mount Sin	_	2 A. I don't recall.
3 four weeks and then shortl		3 CHAYTOR, Q.C.:
4 advised that it was six to	-	4 Q. Ms. Hennessey, you're also, you're the ADM, of
5 then the number of test re		5 course, for board services?
6 from the department's pers		6 MS. HENNESSEY:
7 remember raising a question	_	7 A. Yes.
8 of time that it was taking s		8 CHAYTOR, Q.C.:
9 fall of that year, because the	_	9 Q. Which includes responsibility for all four -
was some workload capac		10 MS. HENNESSEY:
Sinai which delayed the	-	11 A. Yes.
retesting results back to Ea		12 CHAYTOR, Q.C.:
13 CHAYTOR, Q.C.:		13 Q authorities. According to this briefing
14 Q. In the beginning of Octob	per, and it's now	note now, the beginning of October, it's only
broken, of course, in the m		the St. John's specimens that have been sent
16 MS. HENNESSEY:		to Mount Sinai?
17 A. Right.		17 MS. HENNESSEY:
18 CHAYTOR, Q.C.:		18 A. Yes.
19 Q. You submit this briefing n	ote to the minister?	19 CHAYTOR, Q.C.:
20 MS. HENNESSEY:		20 Q. And there'sit's in progress or the process
21 A. Yes.		is under way to receive other samples. Did
22 CHAYTOR, Q.C.:		you have any contact with the other three
Q. And this briefing note or the		23 authorities to inquire as to the status on
briefing note is also put in		24 their end and why the samples weren't being
25 to cabinet secretariat?	-	25 sent?
L		1

Page 37

1 MS. HENNESSEY:

- A. No, I didn't have any direct contact with the
- 3 other health authorities. That was being done
- 4 through Eastern Health.
- 5 CHAYTOR, Q.C.:
- 6 Q. And were any inquiries made by the department
 - as to whether or not the other authorities
- 8 needed any support or assistance in this
- 9 matter?

7

10 MS. HENNESSEY:

- 11 A. I don't recall, but I mean, the other health
- authorities usually when they need some
- additional assistance in managing files, they
- would normally be in contact with the
- department. I mean, they also have the
- flexibility within their own global operating
- budgets to, you know, provide additional
- assistance on specific files if they felt it
- was necessary.
- 20 CHAYTOR, Q.C.:
- 21 Q. In preparing this briefing note, did you
- solicit any information from the other three
- 23 authorities?
- 24 MS. HENNESSEY:
- 25 A. No. I didn't.

Page 38

- 1 CHAYTOR, Q.C.:
- 2 Q. Okay. And why not?
- 3 MS. HENNESSEY:
- 4 A. We were--I would have been relying on
- 5 information being provided by Eastern Health
- 6 to the department at that time.
- 7 CHAYTOR, Q.C.:
- 8 Q. In preparing any of the briefing notes, and we
- 9 will see that there are a number that you're
- involved in, certainly in improving.
- 11 MS. HENNESSEY:
- 12 A. Yeah.
- 13 CHAYTOR, Q.C.:
- 14 Q. Did you ever contact the other authorities to
- receive information from them on this issue?
- 16 MS. HENNESSEY:
- 17 A. No. The information in our briefing notes
- would have been prepared based on information
- provided to us by Eastern Health.
- 20 CHAYTOR, O.C.:
- 21 Q. And why is that, Ms. Hennessey, why was there
- 22 no contact with the other authorities on this
- issue?
- 24 MS. HENNESSEY:
- 25 A. Eastern Health was managing this file. It was

an operational file at Eastern Health, so we

Page 39

- 2 would have relied on information and provided
- 3 by Eastern Health to assist us in preparing
 - our materials.
- 5 CHAYTOR, Q.C.:

4

7

16

- 6 Q. But you clearly understood that the other
 - authorities would be responsible for gathering
- 8 up their own specimens and sending them?
- 9 MS. HENNESSEY:
- 10 A. Yes, they would be sending their specimens
- back to Eastern Health and Eastern Health was
- processing, you know, packaging the specimens
- and sending them to Mount Sinai.

14 CHAYTOR, Q.C.:

- 15 Q. And if there was any delay on the part of the
 - other three authorities in getting those
- specimens in, Eastern Health, I take it, would
- have no, they would have no control over that?
- 19 MS. HENNESSEY:
- 20 A. Well, Eastern Health, I think if they sensed
- 21 that there was an undue delay, that they would
- have made a contact back with each of the
- 23 health authorities.
- 24 CHAYTOR, Q.C.:
 - 25 Q. Okay. And in terms of patient contact, then,

Page 40

- down the road, who did you understand was responsible for that for the patients outside
- CF II 141 : 11 1
- of Eastern Health's jurisdiction?
- 4 MS. HENNESSEY:
- 5 A. I understood, rightly or wrongly, that Eastern
- 6 Health was the contact for the patients.
- 7 CHAYTOR, Q.C.:
- 8 Q. Okay. For all the patients across the
- 9 province?
- 10 MS. HENNESSEY:
- 11 A. Yeah. I did learn that that was not the case.
- 12 CHAYTOR, Q.C.:
- 13 Q. And how far into the process was it before you
- learned that?
- 15 MS. HENNESSEY:
- 16 A. I do not--I seem to recall that it was late in
- the process.
- 18 CHAYTOR, Q.C.:
- 19 Q. As late as -
- 20 MS. HENNESSEY:
- 21 A. When I learned that the other health
- 22 authorities were making contact with the
- patients.
- 24 CHAYTOR, Q.C.:

	i ruge inquiry on mornione receptor resums
Page 41	Page 43
1 Q. And could that have been as late as May, 2007?	and the second bullet on the top of page 5.
2 MS. HENNESSEY:	2 "Eastern Health is also sending letters to the
3 A. Yes. I do not recallnow, I guess with	3 surgeons and other attending physicians on the
4 respect to these notes, I would not have been	4 16th to 20 individuals whose treatment could
5 the contact with Eastern Health in the	5 be impacted based on the Mount Sinai testing
6 preparation of these notes, that there would	6 results. The physicians will then determine
7 have been staff who worked with me would have	7 the follow-up action for these patients. And
8 been having the discussions with Eastern	8 the focus is on notifying physicians of the
9 Health.	9 live patients regarding the findings." Did
10 CHAYTOR, Q.C.:	you understand, at this point in time, that
11 Q. Other than this particular one?	only those patients whose treatment could be
12 MS. HENNESSEY:	impacted were being contacted?
13 A. Yes, yeah -	13 MS. HENNESSEY:
14 CHAYTOR, Q.C.:	14 A. At this point in time, if I look at my
15 Q. The October 3rd one?	briefing note now, that would be my
16 MS. HENNESSEY:	understanding. As I mentioned earlier in this
17 A there was as a couple of notes that I did -	testimony, that the process of notifying
18 CHAYTOR, Q.C.:	patients, I was not clear on throughout the
19 Q. Yes.	19 process.
20 MS. HENNESSEY:	20 CHAYTOR, Q.C.:
21 A myself, but a number of the notes would have	21 Q. And this, your earlier note -
been prepared by staff. And I guess unless a	22 MS. HENNESSEY:
	23 A. Yes.
	24 CHAYTOR, Q.C.:
may not have gotten clear information around that. I seem to recall that myI became	25 Q of August 5th, I take it you're referring
	1
Page 42	
1 aware, or my recall on it was that the other	1 to.
2 health authorities were notifying patients in,	2 MS. HENNESSEY:
3 it was late in the fall, it was in the spring	3 A. Yeah.
4 of 2007.	4 CHAYTOR, Q.C.:
4 of 2007. 5 CHAYTOR, Q.C.:	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that?	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY:	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters.
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah.	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY:
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.:	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes.
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.:
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through,	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons 12 or attending physicians. Did you understand
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons 12 or attending physicians. Did you understand 13 whether there'd be any contact with those
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons 12 or attending physicians. Did you understand 13 whether there'd be any contact with those 14 whose treatment, perhaps, would not be
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing?
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY:
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY:	4 CHAYTOR, Q.C.: 5 Q. And now this briefing note appears to indicate 6 that the patients whose treatment could be 7 impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons 12 or attending physicians. Did you understand 13 whether there'd be any contact with those 14 whose treatment, perhaps, would not be 15 changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding 18 would have been that the patients whose
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified.
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would 20 have been occasions that I would have had some	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified. 10 I know subsequent to this, Eastern Health did,
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would 20 have been occasions that I would have had some 21 contact with Eastern Health, but I would not	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified. 10 I know subsequent to this, Eastern Health did, as I understand it, begin a process of
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would 20 have been occasions that I would have had some 21 contact with Eastern Health, but I would not 22 have had direct contact myself on every note	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified. 10 I know subsequent to this, Eastern Health did, as I understand it, begin a process of notifying all patients.
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would 20 have been occasions that I would have had some 21 contact with Eastern Health, but I would not 22 have had direct contact myself on every note 23 that would have been prepared on this file.	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified. I know subsequent to this, Eastern Health did, as I understand it, begin a process of notifying all patients. 23 CHAYTOR, Q.C.:
4 of 2007. 5 CHAYTOR, Q.C.: 6 Q. Yes, when you became aware of that? 7 MS. HENNESSEY: 8 A. Yeah. 9 CHAYTOR, Q.C.: 10 Q. And what you're saying is that other than the 11 couple of notes that I'll take you through, 12 including this October 3rd, you weren't having 13 direct contact, necessarily, with Eastern 14 Health to receive the information for the 15 preparation of the briefing notes, you were 16 relying on other staff in the department to do 17 that? 18 MS. HENNESSEY: 19 A. That's our usual process. I mean, there would 20 have been occasions that I would have had some 21 contact with Eastern Health, but I would not 22 have had direct contact myself on every note	4 CHAYTOR, Q.C.: 9 Q. And now this briefing note appears to indicate that the patients whose treatment could be impacted will be receiving letters. 8 MS. HENNESSEY: 9 A. Yes. 10 CHAYTOR, Q.C.: 11 Q. There will be letters sent to their surgeons or attending physicians. Did you understand whether there'd be any contact with those whose treatment, perhaps, would not be changing? 16 MS. HENNESSEY: 17 A. At this point in time I think my understanding would have been that the patients whose treatments were impacted were being notified. 10 I know subsequent to this, Eastern Health did, as I understand it, begin a process of notifying all patients.

Wiay 27, 2006 With	u-rage inquiry on normone Receptor Testing
Page 45	Page 47
1 A. Yes.	1 MS. HENNESSEY:
2 CHAYTOR, Q.C.:	2 A. Yes.
3 Q. And the second last bullet indicates "that an	3 CHAYTOR, Q.C.:
4 external peer review by the chief pathologist	4 Q. So you submitted your note, is that right,
of the British Columbia Cancer Institute and	5 October 3rd note and then this has turned into
6 the chief technologist from Mount Sinai	6 a note for Cabinet Secretariat, is that how
7 Hospital was conducted, September 15th to the	7 that works? Because it indicates at the end
8 22nd, 2005, to review current practices and	8 that it is prepared by yourself and Mr. Abbott
9 procedures within the laboratory service.	and reviewed by B. Cooper and S. MacDonald of
Debriefing was held after each review and a	10 Cabinet Secretariat.
full report from each is expected within the	11 MS. HENNESSEY:
next few weeks." Did you or anyone else in	12 A. This note per se wasn't prepared by me or
the department, to your knowledge, request any	approved by Mr. Abbott. The October 3rd note
information as to the results of the reviews	was the note that was prepared by me and
that had been conducted back in September?	approved by Mr. Abbott. This note is Cabinet
16 MS. HENNESSEY:	Secretariat's version of our note. This would
17 A. I did request -	have beenthey added some additional
18 CHAYTOR, Q.C.:	information, there's a couple of points where
19 Q. At this point in time.	they did add the line about the issue, which
20 MS. HENNESSEY:	was not in our note. They added the
21 A. At this point?	information about thein the last bullet in
22 CHAYTOR, Q.C.:	22 the background section, they added the
23 Q. At this point in time, learning that the	information about CBC's website carrying the
debriefing had taken place, did you or anyone	story and they, in the very last bullet where
else request the information from those	it says "Dr. Williams has done an interview
Page 46	Page 48
1 reviews?	with NTV today." Today would have been
2 MS. HENNESSEY:	2 October 3rd, not October 5th.
3 A. On October 3rd when this note was done, I	3 CHAYTOR, Q.C.:
don't recall asking for an update.	4 Q. Right, okay. So what you're saying is most of
5 CHAYTOR, Q.C.:	the information, other than those things that
6 Q. And when this was submitted to the Minister,	6 you've pointed out, was provided to you
7 was there any inquiry back to you from the	through your October 3rd briefing note.
8 Minister or through Mr. Abbott as to the	8 MS. HENNESSEY:
9 outcome of the reviews?	9 A. Yes.
10 MS. HENNESSEY:	10 CHAYTOR, Q.C.:
11 A. No, there wasn't at that point.	11 Q. And they added the issue, as you say and the
12 CHAYTOR, Q.C.:	issue is identified as being "media coverage
13 Q. And if we could go then please to, actually I	regarding potential breast cancer diagnostic
can do it here, the next page, 124, page 6,	14 errors within Eastern Health region."
and this is then the briefing note which we	15 MS. HENNESSEY:
understand was prepared for Cabinet	16 A. And just my comment that it wasn't a
Secretariat and it's copied to the Premier,	diagnostic error, that might have been some of
Mr. Reid, Mr. Crawley, Ms. Matthews and a	the reporting that was going on about it
number of other people, Robert Thompson, you	because ER/PR testing is done after a breast
see the names in the right-hand corner?	20 cancer diagnosis.
21 MS. HENNESSEY:	21 CHAYTOR, Q.C.:
22 A. This is the note that-this is Cabinet	22 Q. And that was not your wording?
23 Secretariat's version of our note.	23 MS. HENNESSEY:
24 CHAYTOR, Q.C.:	24 A. That was not my wording, no.
25 Q. Of your note.	25 CHAYTOR, Q.C.:
i * *	

Way 21, 2000	Williage	inquiry on from one Receptor Testing
	Page 49	Page 51
1 Q. Did anyone from Cabinet Secretariat, either	1	a copy back or not?
2 Mr. Cooper or Ms. MacDonald, did they call	you 2 MS. I	HENNESSEY:
3 andor anyone from Cabinet Secretariat call	·	I don't recall the details specifically back
4 you to get clarification on any of the	4	in October 2005 whether this note came back to
5 information you provided?	5	me.
6 MS. HENNESSEY:	6 CHA	YTOR, Q.C.:
7 A. I believe Mr. Cooper may have called, but I		At this point in time then, Ms. Hennessey, did
8 don't recall the specifics around it. It	8	you understand that you are tasked with this
9 wouldn't be unusual for somebody from Cabi		file for the department?
Secretariat to call when we send notes over if		HENNESSEY:
they wanted some additional information.		No, I can't say that I was fully tasked with
12 CHAYTOR, Q.C.:	12	this file for the department, I would view
13 Q. So you believe he may have called, do you	13	this as a file that I certainly would have
recall anything about your discussion or what		contributed information to and that at
points that he wished clarification regarding?	15	different points in the file I was involved in
16 MS. HENNESSEY:	16	it; at other points, based on my recollection
		that the Deputy Minister was dealing with the
17 A. No, I don't.	17	
18 CHAYTOR, Q.C.:	18	file. For example, the November 17th, 2005
19 Q. Did he or anyone else at Cabinet Secretariat	19	briefing with the Minister, I was not involved
ask for any explanation as to the external	20	in that briefing.
21 reviews that were conducted?		YTOR, Q.C.:
22 MS. HENNESSEY:		Yes, and we'll come to that, so if Mr. Abbott
23 A. Not that I do recall.	23	has stated or suggested that you were tasked
24 CHAYTOR, Q.C.:	24	with the monitoring and management of this
25 Q. And I take it you did not see this, even	125	
25 Q. Third I take it you did not see this, even	25	issue, that wasn't made clear to you at the
25 Q. Tind I take it you aid not see aims, even	Page 50	Page 52
though it says "prepared by you" you did	Page 50	<u>*</u>
	Page 50 ln't 1	Page 52
though it says "prepared by you" you did	Page 50 In't 1 2 MS. I	Page 52 time?
though it says "prepared by you" you did see this note?	Page 50 In't 1 2 MS. I	Page 52 time? HENNESSEY:
though it says "prepared by you" you did see this note? MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I	Page 50 In't 1 2 MS. I 3 A. 4	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't.	Page 50 In't 1 2 MS. I 3 A. 4 5, the 5 6 7	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came back	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q.	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.:
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 kk to 8 CHA 9 Q. 10 MS. I	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came back you? MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q. 10 MS. I 11 A.	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.:
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it?	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA	Page 52 time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it,
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott?
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file.	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY:
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A.	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: And did you have a copy of it in your file	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. 17 CHA	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: And did you have a copy of it in your file MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. ? 17 CHA 18 Q.	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: Q. And did you have a copy of it in your file MS. HENNESSEY: A. I'd have to check for you.	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. ? 17 CHA 18 Q. 19	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be?
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to use final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: Q. And did you have a copy of it in your file MS. HENNESSEY: A. I'd have to check for you. CHAYTOR, Q.C.:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 ck to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. ? 17 CHA 18 Q. 19 20 MS. I	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be? HENNESSEY:
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: A. It should be in my file. CHAYTOR, Q.C.: A. I'd have to check for you. CHAYTOR, Q.C.: I A. I'd have to check for you.	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. 17 CHA 18 Q. 19 20 MS. I 19 20 MS. I 21 A.	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be? HENNESSEY: I felt my primary role was in providing the
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to use final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: Q. And did you have a copy of it in your file MS. HENNESSEY: A. I'd have to check for you. CHAYTOR, Q.C.: I Q. I take it we have whatever was in your file MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. 17 CHA 18 Q. 19 20 MS. I 21 A. 22	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be? HENNESSEY: I felt my primary role was in providing the briefing notes as we moved through the file.
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to us final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: And did you have a copy of it in your file MS. HENNESSEY: A. I'd have to check for you. CHAYTOR, Q.C.: Q. I take it we have whatever was in your file MS. HENNESSEY: A. Yeah.	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. 17 CHA 18 Q. 19 20 MS. I 19 20 MS. I 21 A. 22 23 CHA	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be? HENNESSEY: I felt my primary role was in providing the briefing notes as we moved through the file. YTOR, Q.C.:
though it says "prepared by you" you did see this note? MS. HENNESSEY: A. I can't say I didn't see it because, as I said, sometimes the notes come back to use final notes and sometimes they don't. CHAYTOR, Q.C.: Q. Where would they end up if it came bace you? MS. HENNESSEY: A. Where would it end up? CHAYTOR, Q.C.: Q. Yes, would you have a copy of it? MS. HENNESSEY: A. It should be in my file. CHAYTOR, Q.C.: Q. And did you have a copy of it in your file MS. HENNESSEY: A. I'd have to check for you. CHAYTOR, Q.C.: I Q. I take it we have whatever was in your file MS. HENNESSEY:	Page 50 In't 1 2 MS. I 3 A. 4 s, the 5 6 7 k to 8 CHA 9 Q. 10 MS. I 11 A. 12 CHA 13 Q. 14 15 MS. I 16 A. 17 CHA 18 Q. 19 20 MS. I 22 23 CHA 24 Q.	time? HENNESSEY: I was certainly doing, you know, monitoring of the issue. I was certainly responsible for providing the House of Assembly briefing notes, but I didn't feel that I had full responsibility for the file. YTOR, Q.C.: You didn't feel that you did. HENNESSEY: No. YTOR, Q.C.: And you felt that you shared that, I take it, from what you're saying with Mr. Abbott? HENNESSEY: Yes, I did, yes. YTOR, Q.C.: And who defined what your role in this matter was going to be? HENNESSEY: I felt my primary role was in providing the briefing notes as we moved through the file.

4

7

Page 53

1	supposed to do, as opposed to what Mr. Abbott
1	bupposed to do, as opposed to what in. Hobott

- is supposed to do on this matter?
- 3 MS. HENNESSEY:
- A. I guess it was just my interpretation on what
- 5 was happening.
- 6 CHAYTOR, Q.C.:
- Q. So that wasn't clearly set out for you?
- 8 MS. HENNESSEY:
- A. No.
- 10 CHAYTOR, Q.C.:
- 11 Q. At no point in time did Mr. Abbott say,
- "Moira, here's what I need you to be doing and 12
- here's what I'm going to do on this matter"? 13
- 14 MS. HENNESSEY:
- A. No, that wasn't clearly set out. That's why, 15
- 16 you know, I certainly contributed to this file
- and I certainly have, you know, share the 17
- responsibility for this file, but I never felt 18
- throughout the process that I had full 19
- responsibility for the file. 20
- 21 CHAYTOR, Q.C.:
- 22 Q. And I take it from what you've already told
- the Commissioner that you did not attend all 23
- meetings on the file? 24
- 25 MS. HENNESSEY:

1

Page 54

24

- A. No, the meetings with Eastern Health, the
- meetings that I'm aware of that took place 2
- with Eastern Health were on July 21st, 2005; 3
- August 5, 2005; August 15th, 2005; November 4
- 5 17th, 2005; November 23rd, 2006 and May 15th,
- 2007. And I would have attended three of 6
- 7 those meetings, the two in August, 2005 and
- 8 the May 15th, 2007 meeting.
- 9 CHAYTOR, Q.C.:
- Q. And do you feel -10
- 11 MS. HENNESSEY:
- A. Now I would have been involved in the 12
- 13 briefings with, you know, internal briefings -
- 14 CHAYTOR, Q.C.:
- O. On matters.
- 16 MS. HENNESSEY:
- 17 A. - during House of Assembly sessions.
- 18 CHAYTOR, Q.C.:
- Q. And were you privy to all communications on 19
- the matter within the department? 20
- 21 MS. HENNESSEY:
- A. I'm not sure I understand.
- 23 CHAYTOR, Q.C.:
- Q. Did you take part in all the, you're saying 24
- that you would have been involved in briefings 25

- Page 55 within the department, particularly around the
- 2 House of Assembly and briefing notes. Were
- you involved in all meetings internally or 3
 - other communications within the department on
- the issue, to your knowledge? 5
- 6 MS. HENNESSEY:
 - A. Depending upon the minister of the day, their
- approach to dealing with briefings was 8
- different when Minister Ottenheimer was the 9
- 10 Health Minister. I do not recall being in
- specific briefings with him on this file. 11
- When Minister Osborne and Minister Osborne 12
- sort of, I guess, structured the briefing 13
- 14 process, that he--when the House of Assembly
- was in session and there may have been other 15
- briefings in between, but when the House was 16
- in session that there were daily briefings 17
- with the Minister, some of them were--they may 18
- have been, you know, 45 minutes long and they 19
- would have been briefings on a number of 20
- topics that may have been, you know, of 21
- 22 interest to the public or the media at the
- time. And when Minister Wiseman came to the 23
 - department, there were--and continued to be,
- daily briefings when the House of Assembly is 25
- in session. 1
 - 2 CHAYTOR, Q.C.:
 - Q. And you would take part in those?
 - 4 MS. HENNESSEY:
 - A. Yes, when I'm available.
 - 6 CHAYTOR, Q.C.:
 - Q. If you were available.
 - 8 MS. HENNESSEY:
 - A. And if I'm not available, then one of the
 - staff who works with me usually participates. 10
 - 11 CHAYTOR, Q.C.:
 - Q. And then I take it your staff member would 12
 - then inform you or apprise you of what had 13
 - taken place in the briefing? 14
 - 15 MS. HENNESSEY:
 - A. Yes, that would have occurred, I can't say 16
 - 17 that every day -
 - 18 CHAYTOR, Q.C.:
 - Q. No, that's fair enough, but that would be the 19
 - normal process. If you're not there, you 20
 - would send a delegate? 21
 - 22 MS. HENNESSEY:
 - A. Yes, but every day I'm not sure that there was 23
 - an exchange of information between myself and 24
 - 25 the staff when we came out of every single

Page 56

Multi-Page TM Page 57 Page 59 briefing. The pace in the department is quite A. She would have had some communications with 1 2 busy and -2 her counterpart at Eastern Health on the file. 3 CHAYTOR, Q.C.: 3 CHAYTOR, Q.C.: Q. I understand that, but you would expect that Q. And how about Mr. Hynes, Darrell Hynes, would 4 your staff would inform you of anything that he have been involved in communications on the 5 5 was of import? file as well? 6 6 7 MS. HENNESSEY: 7 MS. HENNESSEY: 8 A. If there was something major, certainly that 8 A. I don't know whether he would have been the Minister wanted done with the file, yes, 9 9 involved extensively on communications, I know and I do have the person who was on this file, 10 when Mr. Osborne was our Minister that he was 10 I found her very good, so I'm pretty confident 11 11 his policy advisor, so he was involved in 12 that if there was something of significance meetings on various files. 12 that the Minister would have wanted me or her 13 13 CHAYTOR, O.C.: to do, that I would have been informed. 14 14 Q. So primarily, I take it then yourself and Mr. 15 CHAYTOR, O.C.: 15 Abbott and sometimes Tansy Mundon would be Q. And who is that? 16 involved in the communications on the file. 16 17 MS. HENNESSEY: 17 MS. HENNESSEY: A. That would have been Beverly Griffiths. 18 A. Yes, and Ms. Griffiths would have been in 19 CHAYTOR, O.C.: 19 contact with respect to the updating of Q. And at one point in time it appeared that, was 20 20 briefing notes. it a Ms. Morris was involved in your briefing 21 21 CHAYTOR, Q.C.: 22 notes, Debbie Morris? 22 Q. And she would have contacts, I take it, with 23 23 MS. HENNESSEY: Eastern Health on the briefing notes from time A. Yes, it was. 24 25 CHAYTOR, Q.C.: 25 MS. HENNESSEY: Page 60 Page 58 Q. And then later that switched to Ms. Griffiths. A. Yes, she would. I guess when I look back now 1 1 Why would that be? 2 there was a number of people, similar to 2 Eastern Health, there was a number of people 3 3 MS. HENNESSEY: involved in the file. If I was to do it A. It may have been a situation where Ms. 4 5 Griffiths was busy on other files and Ms. again, I think I would have done it 5 Morris was the substitute for a period of differently now. I mean, my time, the time 6 6 7 7 that I had available to devote to this file time. would be impacted by the number of files that 8 CHAYTOR, O.C.: 8 I was managing and while this one was 9 Q. So you would look to--Ms. Griffiths was your 9 main staff person involved? certainly an important file, there's only a 10 10 11 MS. HENNESSEY: 11 certain amount of time that I would be able to commit to one file, as I said to you, during A. Ms. Griffiths was the main staff person. 12 12 that fall I had a number of files related to 13 13 CHAYTOR, Q.C.: the House of Assembly, I think it was about 14 Q. So in terms of who was dealing then with the 14 file, I just wanted to get some sense on that 27, that was on 27 different topics. 15 15 within the department. Would it be fair to 16 CHAYTOR, O.C.: 16 17 say that at different points in time and 17 Q. Yes. thinking now of communication and the flow of 18 18 MS. HENNESSEY: 19 communication, whether it's from Eastern

19 A. And then during that fall as well there was a couple of new processes introduced within the 20 government that took time away from my--I 21 mean, we had to balance the requirements 22 within the--our internal organization with the 23 24 need to maintain current information from the 25 health authorities.

Health or within the department, it would be

fair to say that either yourself or Mr. Abbott

or perhaps the director of communications,

Tansy Mundon would have had communications on

20

21

22

23

24

the file?

25 MS. HENNESSEY:

Page 62

1 CHAYTOR, Q.C.:

A. Yes.

25

2

8

25

Q. And three deputy ministers, and do you think in hindsight when you're saying you would have 3 done something different, would it be 4 5 preferable to have had one staff person or a couple of staff people tasked with the 6 responsibility to ensure continuity and 7

9 was coming into the department and flowing out of the department? 10

consistency, I guess, in the information that

11 MS. HENNESSEY:

A. That certainly would be my view that this, you 12 13 know, was a, what I would view a, you know, serious issue in the health system. And we 14 15 did not assign staff specifically to it. In hindsight, if I had to do it over again, I 16 17 guess if it's a lesson learned for me that in the future with events of this nature that I 18 19 don't think we should be loading them on staff who already have a significant workload. I 20 21 think Ms. Griffiths in particular because in 22 addition her responsibilities for Eastern Health that she certainly had a significant 23 24 role to play with with respect to our

Page 63 of demands on her time; there were a lot of

1 2 demands on my time. Now, I think with respect

to some of the larger issues that the 3

4 department is handling, we would all be better

5 served if we had put one or two individuals

and certainly in hindsight, I would have seen 6

7 the need to certainly link a physician to this

8 file.

9 CHAYTOR, Q.C.:

Q. And a physician you're saying, as well. 10

11 MS. HENNESSEY:

12 A. Yes.

13 CHAYTOR, O.C.:

14 Q. Okay. Well, in that regard, has there been 15 any change of practice within the department? 16 I'm sure you deal with significant issues on a 17 fairly regular basis, perhaps not of this

18 magnitude, but has there been any change in

19 practice in that now a key person is assigned 20 to a significant issue?

21 MS. HENNESSEY:

22 A. I can't say that there's been a significant 23 change in practice.

24 CHAYTOR, Q.C.:

Q. Okay. And have you, in your own assignment of

files, made any change in your practice? 1

2 MS. HENNESSEY:

A. With respect to how I handle files? 3

4 CHAYTOR, Q.C.:

Q. And how people are assigned to deal with

A. I do my best to try and assign the files to an

matters. 6

8

7 MS. HENNESSEY:

individuals, but there's a number of factors 9 that come into play if they are called away, 10 11 you know, if they're on vacation or they're called away to another priority for the 12 13 department, then that reduces the time that they have available to commit to this file. 14 We don't have--I can't say that we've really 15 done a good job in putting a structure around 16 17 how we would manage files where there are 18 adverse outcomes.

19 CHAYTOR, Q.C.:

Q. Okay. If we could look, please, then at P-20 21 1417, page six please, I'm sorry I said the 22 wrong number, it's P-1477 and page six, here we go. I'm not sure, Ms. Hennessey, if you've 23 24 had a chance to see this document. These are 25 apparently notes which were taken by Mr.

Page 64

aboriginal health issues. So, there was a lot

141ay 21, 2000 141uit	i-i age inquiry on Hormone Receptor Testing
Page 65	Page 67
1 Hynes. We have his handwritten version. And	1 And this is an e-mail to you from Mr. Abbott
2 actually his handwritten version is here and	and it's October 12, 2005 and it originates
3 this is a typed version of his notes from	from e-mail from Mr. Reid regarding a friend
4 executive meetings.	of his or a friend of a friend. Do you recall
5 MS. HENNESSEY:	5 this exchange and what it was about?
6 A. Right.	6 MS. HENNESSEY:
7 CHAYTOR, Q.C.:	7 A. I seem to recall that Mr. Reid wrote with
8 Q. And this is a document that we didn't have in	8 respect to a friend of his and her experiences
9 our possession when we met with you. This is	9 with respect to this issue.
something we received last week. October 7,	10 CHAYTOR, Q.C.:
2005 and it appears there was an executive	11 Q. Okay. And it's aboutone of the things that
meeting and one of his bullets is "breast	she's referring to here is about patient
cancer issue, need for protocols to address	contacts and who would be contacted. And
situation, how board reacts versus our	you'll see down in the middle of the page she
reaction". Do you recall being present at the	really had three concerns. First, I guess
executive meeting within the department on	being that the mistake is a serious one that
that date and the discussion around this	will have an impact on hundreds of women and
18 issue?	their families. She believes she would never
19 MS. HENNESSEY:	have been told if she did not ask. We
20 A. I don't recall the discussion around this	20 understand she was confirmed negative. Did
21 issue.	21 not press for information about her own
22 CHAYTOR, Q.C.:	medical condition. The question is not just
23 Q. Okay. And do you have any recollection as to	that those with changed results be told, but
what this refers to? Whether or not there was	that all be told. It is their right to expect
25 any discussion at any point in time around the	25 this level of disclosure and respect. And the
J. J. S.	
Paga 66	Daga 68
Page 66	
need for protocols to address the situation	retesting is taking time as Mount Sinai is
need for protocols to address the situation and "how the board reacts versus our", I take	retesting is taking time as Mount Sinai is very busy and this is time that many women do
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction?	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY:	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this.	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.:	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY:
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.:
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: O. Did you do anything in follow-up on that
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue?
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation?	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY:
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY:	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of.	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of.	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: O. And October 7, 2005, is this the first time	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: O. So you understood that Mr. Abbott was
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting?	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this?
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY:	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this?
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY: A. It could have been. I mean, our executive	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this? MS. HENNESSEY: A. Yes.
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY: A. It could have been. I mean, our executive does not meet regularly during the summer,	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.:
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY: A. It could have been. I mean, our executive does not meet regularly during the summer, period. Whether it was raised in September, I	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: CHAYTOR, Q.C.: CHAYTOR, Q.C.:
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY: A. It could have been. I mean, our executive does not meet regularly during the summer, period. Whether it was raised in September, I don't remember.	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: A. Yes. CHAYTOR, Q.C.: Q. And in terms of the issue of all patients to be contacted, did you follow up with Eastern
need for protocols to address the situation and "how the board reacts versus our", I take it that means the department's reaction? MS. HENNESSEY: A. I'm not able to comment on this. CHAYTOR, Q.C.: Q. Okay. So, if you were present at this meeting, you'd have no recollection of this issue or that this issue being addressed later. Do you know whether or not there were any protocols developed to address the situation? MS. HENNESSEY: A. Not that I'm aware of. CHAYTOR, Q.C.: Q. And October 7, 2005, is this the first time that this issue is raised at an executive meeting? MS. HENNESSEY: A. It could have been. I mean, our executive does not meet regularly during the summer, period. Whether it was raised in September, I	retesting is taking time as Mount Sinai is very busy and this is time that many women do not have and she doesn't think it's good enough to wait and other efforts to be made. And this does get relayed to you from the deputy minister, you're copied on that e-mail. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Did you do anything in follow-up on that issue? MS. HENNESSEY: A. I did not do any follow-up on this issue because the Deputy Minister was dealing with Mr. Reid on it. CHAYTOR, Q.C.: Q. So you understood that Mr. Abbott was following up on this? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: CHAYTOR, Q.C.: CHAYTOR, Q.C.:

May 27	<u>, 2008</u> N	Aulti-P	age	Inquiry on Hormone Receptor Testing
		ge 69		Page 71
1	everyone was going to be contacted. If she	1		general information related to the health
2	hadn't gone looking for her information, she	2		system, that individual would follow through
3	wouldn't know. Did you have any follow up o	on 3		and just provide the information. If it's an
4	that?	4		inquiry related to a specific health issue,
5 MS. H	IENNESSEY:	5		many times she would engage the regional
6 A.	I didn't step in to this particular issue	6	i	consultant responsible for the area. The
7	because the Deputy Minister was dealing with	h 7		consultant would take the inquiry, call
8	Mr. Reid on it.	8		Eastern Health, outline what the concerns were
9 CHAY	TOR, Q.C.:	9)	and ask Eastern Health to get back to the
10 Q.	And so do you understand that the Deputy	10)	individual. Sometimes Eastern Health would
11	Minister followed up on this issue?	11		come back to us, but our general practice is
12 MS. H	IENNESSEY:	12		that we would prefer that the health authority
13 A.	I don't know whether he had any contact with	1 13		go back to the individual who's raising the
14	Eastern Health on the issue. The approach	14		concern because they would have a more
15	used here is a bit different than what our	15		detailed working knowledge of what was
16	normal approach would be with respect to	16	,	happening than the Department would.
17	contacting Eastern Health.	17	CHAY	TOR, Q.C.:
18 CHAY	TOR, Q.C.:	18	Q.	Okay, and so how was the approach different
19 Q.	Okay. Tell me that then. How was it	19		here?
20	different?	20	MS. H	IENNESSEY:
21 MS. H	IENNESSEY:	21	A.	Well, I think in this particular situation
22 A.	Well, I guess from my perspective, when an	22		that the Deputy Minister referred Mr. Reid
23	inquiry comes into the Department, that we	23		directly to the health authority.
24	would followwe would contact Eastern Heal	th 24	CHAY	TOR, Q.C.:
25	and advise that the inquiry had been made,	25	Q.	Okay, and we also see on this e-mail that it's
	Pag	ge 70		Page 72
1	would outline the issues that were being	, 1		yourself, Mr. Reid and Sheree MacDonald, this
2	raised and then ask Eastern Health to do the	2		e-mail goes to her as well. Who's Sheree
3	follow up back with the individual.	3		MacDonald?
	TOR, Q.C.:			ENNESSEY:
	Okay. So the normal approach would bewh			Sheree MacDonald would have been working in
6	you say "we" the normal approach would be the			Cabinet Secretariat at the time.
7	you would make that contact?			TOR, Q.C.:
1	IENNESSEY:	8		Okay, and what significance would that have,
1	I wouldn't necessarily myself make the	9		the e-mail being sent to Ms. MacDonald?
10	contact, but our normal process when an			ENNESSEY:
11	inquiry would come to our attention -	11		I'm not sure whether there's a particular
1	TOR, Q.C.:	12		reason why that would have been sent. I'm
1	The Department you mean, our attention?	13		just wondering was the original e-mail sent
1	ENNESSEY:	14		from Mr. Reid to Sheree.
1	Well, I can only speak to the Regional Health			TOR, Q.C.:
13 A.	or on, I can only speak to the Regional Health	13	СПАТ	ION, Q.C

A. Well, I can only speak to the Regional Health 15 branch that I have responsibility for. 16

17 CHAYTOR, Q.C.:

18 Q. Yes, okay.

19 MS. HENNESSEY:

A. That if an inquiry comes, oftentimes if it 20 21 comes in through the client services inquiries 22 officer or comes from the Minister's office,

23 that the inquiry--I mean, for the client

24 services inquiries officer, if someone is 25 calling on a routine matter, looking for 21 MS. HENNESSEY: 22 A. Right.

October 12th 2005.

16

17

18

19

20

23 CHAYTOR, Q.C.:

24 Q. And it's sent as high priority from Tansy to 25 Darrell Hynes and others, including Minister

Q. And I can't tell from this exhibit whether

that's the case or not. If we could have,

following, I believe it's the same date,

please, 0859? This is an e-mail exchange then

May 27, 2008	Multi-Page	Inquiry on Hormone Receptor Testing
Pag	ge 73	Page 75
1 Ottenheimer and Mr. Abbott and yourself.	1	the department on various files. And that the
2 MS. HENNESSEY:	2	ministers are open to doing interviews on the
3 A. Yes.	3	various files.
4 CHAYTOR, Q.C.:	4 CHA	AYTOR, Q.C.:
5 Q. And then you e-mail the group back and say	y 5 C	2. In an e-mail I showed you yesterday, of
6 "FYI, as Tansy says CBC is back and we expec	t 6	course, early on, July 19, 2005 the last e-
7 that the volume of media inquiries and quick	7	mail in the exchange back from Carolyn Chaplin
8 responses will pick up again" and Tansy had	1 8	where she indicates that any public
9 made that comment, "in case we didn't realize	e 9	announcement when this issue did go public
that CBC was back, they are." What did you	10	that it was possible that the significance
understandwhat's the significance to that of	11	would be minimized or words to that effect.
12 CBC being back?	12	Did you ever hear that kind of sentiment
13 MS. HENNESSEY:	13	expressed in the department?
14 A. I think at that point in time, CBC maythey	14 MS.	HENNESSEY:
may have been on strike or a walk out and that	at 15 A	. I'm not aware of that. I have to speak from -
they had returned to work. I mean, my memo	ory 16 CHA	AYTOR, Q.C.:
is foggy on this particular point, and that	17 Ç	Yes, your own knowledge.
thethere may then be an increase in the	18 MS.	HENNESSEY:
number of media inquiries to the Minister's	19 A	I said that, you know, that thethere are a
office on various health matters.	20	number of media inquiries come to the
21 CHAYTOR, Q.C.:	21	department regularly and, you know, to the
Q. Okay, and so I take it there hadn't been too	22	best of my knowledge, the ministers are quite
23 much contact from CBC and this is just	23	open to speaking to the media.
referencing that, that they're now back with a		AYTOR, Q.C.:
25 number of issues?	25 Ç	2. And that was true of all three ministers that
Paş	ge 74	Page 76
1 MS. HENNESSEY:	1	you worked with on this file?
2 A. Yes, and I think it was with respect to issues	2 MS.	HENNESSEY:
3 in general, not specific to this file.	3 A	That'syeah and I can't recall specifically
4 CHAYTOR, Q.C.:	4	on this file, but generally, you know, the
5 Q. Yes. There's a number listed here, and I	5	ministers that I've worked with, that they
6 think one of which is the ER/PR issue, CBC	6	were open and still continue to be open to
7 Radio, Mark Quinn. During the whole handli	ing 7	speaking to the media and providing
8 of the issue, I know I asked you yesterday if	8	information on various health matters.
9 when you first learned of the issue, if you		AYTOR, Q.C.:
felt that there wasit was being treated	10 Ç	2. And with respect specifically to this issue,
confidentially, and you didn't get that sense	11	did you ever get that sense from anyone else
that this was confidential, but did you have	12	other than the ministers? Did you ever get
any sense along the way that the Department	or 13	that sense within the department that there
others involved in the issue were looking to	14	was an effort to keep the issue under the
keep it as low profile as possible?	15	radar?
16 MS. HENNESSEY:		HENNESSEY:
A. I can't say that I had that general sense. I		A. I don't recall, as we moved through this file
mean, normally, I mean, the Minister is	18	any more than other files. I mean, we
accountable to the public, you know, for the	19	anticipate the ministers having to speak to
20 health service. At the end of the day, the	20	various health matter and certainly when the

22

23

24

programs.

25 CHAYTOR, Q.C.:

House of Assembly is in session that that's

to the public for public services and

the forum where the ministers are accountable

21

22

23

24

25

Minister is the person accountable to the

public for the delivery of health services to

the people of the province. I mean, the

health portfolio is fairly broad. There are a

number of media inquiries come regularly to

May 27, 2008	Multi-Page ¹	Inquiry on Hormone Receptor Testing
I	Page 77	Page 79
1 Q. Okay. If we could have then, please, P-143	-	that's all that's written there. Do you have
2 And this again is minutes of executive	2	any recollection as to what was discussed at
3 committee meeting. This one is October 1	14, 3	that time or any concerns expressed regarding
4 2007. So, I take it that the executive	4	the handling of the issue?
5 committee meets every week?	5 MS.	HENNESSEY:
6 MS. HENNESSEY:	6 A	. I would think just because of the timing that
7 A. Yes, for the most part the executive commi		there probably was some general discussion
8 meets on Friday mornings. We don't meet of		around the, that the ER/PR issue was now, I
9 week during the year. The meetings are	-	guess, had become a bigger public issue.
certainly reduced during the summertime		AYTOR, Q.C.:
they meetings, for the most part, don't occu		. And I take it, Ms. Hennessey, that if you
unless a deputy is there. We're in a little	12	weren't in on all discussions or meetings,
bit of a different situation now where our		this would be an opportunity for a sharing of
deputy is not available. So, we did do an		information.
executive meeting last Friday morning.		HENNESSEY:
16 CHAYTOR, Q.C.:		Yes, it would be.
17 Q. Yes, this period of time in particular I'm		AYTOR, Q.C.:
wondering about. And yourself and Mr. Al		So that everybody could be brought up to speed
are in attendance as is Tansy Mundon.	19	as to the latest developments on the issue?
20 MS. HENNESSEY:		HENNESSEY:
20 MS. HENNESSET. 21 A. Yes.		This particular situation, yes, that's the
22 CHAYTOR, Q.C.:	22	general purpose of our executive meetings is
		to provideI mean, there is a structure to
		-
24 meetings, I take it? 25 MS. HENNESSEY:	24 25	our meetings and then it's an opportunity for various executive people to raise various
1 A. Yes.	Page 78	Page 80
	1 2 6114	matters.
2 CHAYTOR, Q.C.:		YTOR, Q.C.:
3 Q. And Mr. Hynes is also present. The minister doesn't attend?	$\begin{bmatrix} 3 & Q \\ 4 & \end{bmatrix}$. And we only have minutes though of two
		meetings in which it was on the agenda.
5 MS. HENNESSEY:		HENNESSEY:
6 A. No, he doesn't. The minister, certainly if		. Right.
7 there's some particular issue that the		YTOR, Q.C.:
8 minister wants to speak to the full executive		Although we do have notes from Mr. Hynes on
9 on it, he or she certainly, you know, has	9	two other meetings. Was the issue a regular
attended on specific issues, but it's not a	10	item on the agenda or was it sometimes and
11 regular occurrence for the minister to -	11	sometimes not.
12 CHAYTOR, Q.C.:		HENNESSEY:
Q. Do you know if the minister ever attended with		This issue was not a regular -
respect to the ER/PR issue?		YTOR, Q.C.:
15 MS. HENNESSEY:		. It wasn't.
16 A. I don't recall the minister being there on		HENNESSEY:
that issue.		agenda item.
18 CHAYTOR, Q.C.:		YTOR, Q.C.:
19 Q. At any point in time.		Okay. If we could then at P-1439, please.
20 MS. HENNESSEY:	20	And this is the other set of minutes that we
21 A. No.	21	have and again, this is October 28, 2005 and
22 CHAYTOR O.C.	22	you and Mr. Abbott. Ms. Mundon and Mr. Hynns

23

24

you and Mr. Abbott, Ms. Mundon and Mr. Hynes

are all present and number five on the agenda

was the ER/PR retesting. And Tansy Mundon

Q. Okay. And number 17 on your agenda was the

ER/PR retesting and the executive discussed

the current status of this ongoing issue and

22 CHAYTOR, Q.C.:

23

24

Page 81 noted Eastern Region is not keeping her in the

- 2 loop on communication issues. She was unaware
- of the interview Dr. Williams did on "Out of 3
- 4 the Fog", Tansy Mundon to e-mail John Abbott
- 5 regarding this issue, John Abbott to follow-up
- with Mr. Tilley. 6
- What do you recall being discussed around 7
- 8 that issue?
- 9 MS. HENNESSEY:
- A. With respect to, I don't know if I can speak 10
- specifically to that issue, but when the 11
- health authorities are speaking to the media 12
- on various health matters that the department 13
- 14 wishes to be kept apprised of that because
- many times when a health authority speaks on a 15
- 16 health matter, that there could be a follow-up
- request for the minister to speak to the 17
- 18 matter.
- 19 CHAYTOR, O.C.:
- Q. Okay. Was there anything else other than the 20
- issue raised by Ms. Mundon? Was there 21
- 22 anything else discussed at that point in time
- about the ER/PR retesting? 23
- 24 MS. HENNESSEY:

1 CHAYTOR, Q.C.:

25 A. I don't recall.

- Page 82

- Q. Okay.
- 3 THE COMMISSIONER:
- Q. Is there a protocol, a directive, a
- 5 communication or something between the
- department and the health authorities which 6
- conveys to the health authorities the idea 7
- 8 that this should be done?
- 9 MS. HENNESSEY:
- A. With respect to keeping the department 10
- 11 apprised of -
- 12 THE COMMISSIONER:
- Q. Yes, of communications? 13
- 14 MS. HENNESSEY:
- A. I don't believe there would have been a 15 written directive. 16
- 17 THE COMMISSIONER:
- Q. Well, are you confident that all authorities 18
- would know that if they're making public 19
- pronouncements on things, they have to, in 20
- effect, advise the department? 21
- 22 MS. HENNESSEY:
- A. Generally, I think the health authorities 23
- would be aware of that. 24
- 25 THE COMMISSIONER:

- Page 83 Q. But we're not sure how they got that notion?
 - 2 MS. HENNESSEY:
 - A. No, I think that they would have gotten it 3
 - through informal communications. 4
 - 5 THE COMMISSIONER:
 - Q. All right.
 - 7 CHAYTOR, Q.C.:
 - Q. If we could look please then at P-0096. Ms.
 - Hennessey, perhaps while we're bringing that
 - 10 up, what do you recall being your next
 - involvement in this matter? 11
 - 12 MS. HENNESSEY:
 - A. I think my next involvement would have been a
 - 14 preparation of this, I know it went for the
 - House of Assembly opening. 15
 - 16 CHAYTOR, Q.C.:
 - Q. Okay. And so the House of Assembly then is 17
 - opening in November, I take it. Yes, 18
 - 19 generally, it opens the early part of
 - November. 20
 - 21 CHAYTOR, Q.C.:
 - 22 Q. Okay. And so you would have been involved in
 - trying to prepare briefing note for the House 23
 - of Assembly briefing book?
 - 25 MS. HENNESSEY:

24

13

- A. Yes. 2 CHAYTOR, Q.C.:
- Q. And what did you do in preparation for that?
- 4 MS. HENNESSEY:
- A. With respect to that particular note, do you
- mind if I refer to -6
- 7 CHAYTOR, Q.C.:
- Q. Sure. Well, what I've got up here is then P-8
- 0096, if that assists your memory. 9
- 11 A. Oh sorry, this is--I would have made a contact
- with Eastern Health to get some current 12
- 13 information on the file.
- 14 CHAYTOR, Q.C.:
- 15 Q. Okay. And I believe your contact was on
- November 3, 2005 and you contacted Mr. Tilley 16
- 17 directly?
- 18 MS. HENNESSEY:
- A. Yes, I did. 19
- 20 CHAYTOR, O.C.:
- 21 Q. Okay. And what was your purpose then in
- contacting Mr. Tilley at that time? 22
- 23 MS. HENNESSEY:
- A. At that time it was to get an update from 24
- 25 Eastern Health in order to prepared a briefing

Page 84

Ma	ay 27	, 2008 Mult
		Page 85
1		note for the minister.
2	CHAY	TOR, Q.C.:
3	Q.	And you write to Mr. Tilley, would this have
4		been done then on your own initiation or would
5		somebody have asked you to do this?
6	MS. HI	ENNESSEY:
7	A.	As we go into the House of Assembly, I mean,
8		we are asked to identify issues that could
9		potentially get raised in the House of
10		Assembly and we submit our list to the
11		director of communications who reviews the
12		lists, if I recall correctly with the deputy
13		minister and we finalize a list of briefing
14		notes that will be prepared. That would be
15		done by every branch within the department.
16	CHAY	TOR, Q.C.:
17	Q.	Okay. And you write to Mr. Tilley on November
18		3 and you say, "Hi George", so I take it you
19		know Mr. Tilley fairly well?
20	MS. HI	ENNESSEY:
21	A.	Yes, I do.
22	CHAY	TOR, Q.C.:
23	Q.	"Can you give me an update on the contacting
24		of patients? Where are we and when will all
25		patients be contacted? We need to ensure that
		Page 86
1		the minister can state all patients have been
2		contacted when the House opens later this
3		month". So, first of all, on that why was
4		that important, that the minister be able to
5		state that all patients have been contacted?

6 MS. HENNESSEY:

A. I think it would be important from the 7 minister's perspective, from the department's 8 perspective that patients would be aware of 9 what was happening with respect to their 10 11 personal information.

12 CHAYTOR, Q.C.:

Q. And was this the first then contact that you 13 made since your October contact on that issue, 14 the status of the contacting and the patients? 15

16 MS. HENNESSEY:

17 A. It could very easily have been the next contact that I made with Eastern Health. 18

19 CHAYTOR, Q.C.: 20 Q. Okay. And then you go on to say, "also have you received the report from the chief 21 22 pathologist at the BC cancer institute and the chief technologist at Mount Sinai. If yes, 23 24 can you give me a quick update to reflect in the minister's House of Assembly note. 25

Thanks, Moira".

Now, Ms. Hennessey, of course, back in

October you were told that the reviewers had 3

Page 87

been in in September.

5 MS. HENNESSEY:

A. Right.

1

4

7 CHAYTOR, Q.C.:

Q. They had been debriefed and that their reports

were expected shortly thereafter.

10 MS. HENNESSEY:

A. Yes.

12 CHAYTOR, Q.C.:

Q. So, you're following up, I take it, on that.

14 MS. HENNESSEY:

A. Yes, I would have been.

16 CHAYTOR, Q.C.:

Q. And you're wondering if the reports are back 17 and what you can then put in the briefing note 18 19 regarding that. And then Mr. Tilley's response to you is that he's in Ottawa. "I 20 know a briefing meeting has been set with the 21 22 minister on November 17 to brief him for the House. In the meantime, if there is some 23 immediate need, you have in the interim, I ask 24 25 that you touch back with Bob Williams" and he

4

5

7

9

10

11

12

Page 88 sends you that response at 2:15 the same day. 1 2

And then if we can look at, please 1440.

3 THE COMMISSIONER:

Q. Just before we leave this, can we go back to the questions on the bottom there? You ask two questions. The first one is "can you give 6 me an update on the contacting patients, where are we and when will the patients be 8 contacted", which is a question. And then you say, "we need to ensure that the minister can state all patients have been contacted when the House opens later this month". What was

the reason of adding that statement to the 13 question which is "are they contacted"? Are 14 15

you--it seems to me when I'm reading that, I can interpret it in various ways and I'm just 16

17 wondering what you meant by it?

18 MS. HENNESSEY:

19 A. At that point I think I was trying to get some sense from Mr. Tilley whether all the patients 20 21 had been contacted.

22 THE COMMISSIONER:

Q. Yes, which you do in your sentence there, you 23 say, "can you give me an update on the 24 contacting of patients, where are we and when 25

141ay 21, 2000	i-i age inquiry on Hormone Receptor Testing
Page 89	Page 91
will all the patients be contacted" which is	1 Minister were writing him, the Minister might
2 kind ofand what's your timeline for this	2 say make sure that that's done before the
3 contact.	3 House opened, but from your position, the best
4 MS. HENNESSEY:	4 you could do was to say the Minister would
5 A. Yes.	5 like to be in the position to say that?
6 THE COMMISSIONER:	6 MS. HENNESSEY:
7 Q. And then there's the last sentence and the	7 A. Yes, that's correct.
8 question is, were you sending a message or	8 THE COMMISSIONER:
9 asking a question, I think it what I'm asking.	9 Q. And Mr. Tilley, knowing enough, should know
10 MS. HENNESSEY:	that what you're really saying is make sure
11 A. I think I was sending a message, but I'm not	11 you do that, or you got a problem.
in a position where I could direct a health	12 MS. HENNESSEY:
authority.	13 A. It would be difficult for me to speculate on
14 THE COMMISSIONER:	how Mr. Tilley interpreted -
15 Q. I suppose that's what I'm saying. If I'm	15 THE COMMISSIONER:
reading that letter, I canor reading that	16 Q. Well, except that you're the one that's
note, one way of interpreting that is to say	sending the message, so I was just wanting to
to Mr. Tilley who you're saying you can't	make clear that I understood what message you
direct to do something, I, Minister, will want	were sending to Mr. Tilley.
to be able to say that everybody has been	20 MS. HENNESSEY:
21 contacted when he stands up to answer a	21 A. The message that I was sending was a hope that
question in the House of Assembly.	22 all the patients would have been notified at
23 MS. HENNESSEY:	23 that time.
24 A. Yeah.	24 THE COMMISSIONER:
25 THE COMMISSIONER:	25 Q. All right, thank you. Now you were moving us
Page 90	
1 Q. This is my heads up to you to make sure	1 on to another -
2 everybody has been contacted before that date	2 CHAYTOR, Q.C.:
3 occurs.	3 Q. Actually, let's look at P-0097, please, and
4 MS. HENNESSEY:	4 this isso Mr. Tilley had suggested if you
5 A. That would have been -	5 need anything urgently, then you could contact
6 THE COMMISSIONER:	6 Dr. Williams.
7 Q. Or was there another message?	7 MS. HENNESSEY:
8 MS. HENNESSEY:	8 A. Yes.
9 A. No, I think the message was one that we would	9 CHAYTOR, Q.C.:
have hoped, at that point in time, that there	Q. And it appears that you in fact do that at
11 would have been a contact made.	2:56 p.m. You send Dr. Williams an e-mail, so
12 THE COMMISSIONER:	less than 45 minutes or around 45 minutes
Q. Okay. So this was your sort of polite way of	later, you're e-mailing Dr. Williams, and he's
saying to Mr. Tilley, make sure that's done	"Hi, Bob" and you've told us before that you
before the House opens?	know him, and I take it you know Dr. Williams
16 MS. HENNESSEY:	well enough that you'd pick up the phone and
17 A. Yes, I'm notas I said, I'm not in a position	phone him and call him if you needed any
18 -	18 information?
19 THE COMMISSIONER:	19 MS. HENNESSEY:
20 Q. Position to tell him.	20 A. Yes, I certainly do.
21 MS. HENNESSEY:	21 CHAYTOR, Q.C.:
22 A to tell a health authority what to do, but	Q. And you ask him, "can you please provide me an
23 it was certainly -	23 update on where you are with the contacting of
24 THE COMMISSIONER:	patients. I understand the process is ongoing
25 Q. Well, let me just put it this way, if the	and there have been some problems." So Ms.

understand were being encountered? 21 22 MS. HENNESSEY:

23 A. I think there may have been some difficulties in reaching some of the patients, but I don't 24 recall, Ms. Chaytor, the specifics around 25

that. It's over two years ago.

2 CHAYTOR, Q.C.:

1

Q. Yes, I understand that. So you understood 3 that there were problems in the process of 4 5 contacting?

6 MS. HENNESSEY:

A. Yes. 7

8 CHAYTOR, O.C.:

Q. And I take it that information--where would vou have received that information? Where 10 11 would it have come from?

12 MS. HENNESSEY:

A. It may have come from previous conversation 13 with someone at Eastern Health or somebody 14 within my office having a conversation with 15 someone at Eastern Health. 16

17 CHAYTOR, Q.C.:

Q. And had you shared that understanding with Mr. 18 Abbott or the Minister, that there had been 19 trouble or problems encountered in contacting 20 21 the patients? 22 MS. HENNESSEY: A. I don't recall specifically.

23

24 CHAYTOR, O.C.:

Q. You go on then to ask Dr. Williams "also, have

you received the report from the B.C. pathologist and the Mount Sinai technologist?

Page 95

Page 96

If yes, what is the general finding(s)? While I know you are briefing the Minister later

this month, we have to complete the first

draft of the House of Assembly briefing note

by tomorrow. I will then update it after the

meeting with the Minister." So you're asking

Dr. Williams whether he's received the report

who did the reviews and what the general

findings were, and why would you be looking

for that information, Ms. Hennessey?

A. I would have been looking for that information, one, to put it in the briefing note, but also to provide some sense to the Minister as to what the B.C. pathologist and the Mount Sinai technologist may have found.

21

Q. And what did you expect their findings to be 22 able to shed light on? What information would you expect that to be of assistance to the 23 Minister? What do you think would be of 24 assistance to the Minister in what the 25

findings of the external reviewers? 1

2 MS. HENNESSEY:

Page 94

3 A. I guess it would be just some sense as to what the general findings were and what some of the 4

5 general recommendations were and what measures

that Eastern Health was putting in place to 6

7 address them.

8 CHAYTOR, O.C.:

9 Q. Now it is the general findings, is what you're 10 asking for?

11 MS. HENNESSEY:

12 A. Yes.

13 CHAYTOR, Q.C.:

14 Q. What did you understand the reviewers were 15 doing?

16 MS. HENNESSEY:

17 A. I understood that the reviewers were--they had made a site visit and were looking at the 18 19 review of the ER--the section of the 20 laboratory as it related to ER/PR testing to try and identify some of the issues that may 21 22 have arisen that resulted in the changes in

23 test results.

24 CHAYTOR, Q.C.:

25 Q. Okay. So you were expecting that it would

May 27, 2008 Mu	lti-P	age TM	Inquiry on Hormone Receptor Testing
Page 9	97		Page 99
1 have shed light on what the issues were, the		MS. HE	ENNESSEY:
2 background -	2	A	No, they didn't.
3 MS. HENNESSEY:	3	CHAY	ror, Q.C.:
4 A. Yes.	4	Q	If we could look at P-0098, please, and this
5 CHAYTOR, Q.C.:	5	i	is an e-mail then from Ms. Predham to you the
6 Q giving rise to the problems with the	6	j :	following day, November 4th, and she also
7 testing?	7	' :	sends the e-mail to Dr. Williams and copies
8 MS. HENNESSEY:	8	;]	his assistant re: ER/PR update. "Hi, Moira.
9 A. Yeah.	9	,	Understand you were speaking to Dr. Williams
10 CHAYTOR, Q.C.:	10) ;	and require an update as to our communications
11 Q. Did anybody ask you to obtain that	11		efforts regarding the ER/PR situation and the
information?	12		following represents 611 individuals. Some of
13 MS. HENNESSEY:	13	1	those individuals have hadhave more" I think
14 A. I don't recall whether anyone specifically	14	- 1	that should be "than one sample sent." So
asked me to get that information. I certainly	15	i 1	there's 611 individuals, and she breaks that
would have beenwe knew that the reviewers	16	j (down into certain categories for you.
had been here in September, that hopefully	17	•	Now she indicates at the beginning of her
that would assist Eastern Health to try and	18	;	e-mail that she understands you had been
identify what some of the issues were and	19	, ;	speaking to Dr. Williams. Do you recall,
20 provide some recommendations, and I was just	20) ;	after sending your e-mail on November 3rd,
following up in order to update the Minister	21	. 1	that you had a discussion with Dr. Williams?
and prepare the House note.	22	MS. HE	ENNESSEY:
23 CHAYTOR, Q.C.:	23	A	I certainly spoke to Dr. Williams a few times
24 Q. So you think this was -	24	. (during this file, so I would think if Heather
25 MS. HENNESSEY:	25	[Predham is indicating that I was speaking to
Page 9	8		Page 100
1 A. Whether someone specifically asked me to	1		Dr. Williams, I would have been.
2 contact Eastern Health, I don't remember.	2	CHAY	TOR, Q.C.:
3 CHAYTOR, Q.C.:	3	Q	And do you recall in your conversation with
4 Q. But you think this is your own initiative to	4	.]	Dr. Williams that he answered your questions
5 ask about the general findings?	5		regarding the general findings from the
6 MS. HENNESSEY:	6	5 (external reviews?
7 A. It could very well have been, or I thinkif I	7	MS. HE	ENNESSEY:
8 think about it now, it was probably my own	8	A	I don't recall specifically, but I think one
9 initiative then because the briefing note on	9		of the messaging inone of the messages in a
November 5th, it just has prepared by me on it	10)]	piece of information in the November 5th note
and there's no approved by on it and I seem to	11	,	would indicate that the problem had not been
recallI wouldn't put the Deputy Minister's	12	l i	identified at that time.
name on the bottom of a note if he had been	13	CHAY	TOR, Q.C.:
available at the time.	14	Q.	Okay, and you take it you would have received
15 CHAYTOR, Q.C.:	15	. 1	that information from Dr. Williams?
16 Q. Okay, so you probably took this on your own	16	MS. HE	INNESSEY:
initiative without the Deputy Minister being	17	Α.	Yes, I think so.
18 aware?	18	CHAY	TOR, Q.C.:
19 MS. HENNESSEY:	19		And I'll take you to that reference in the
20 A. I'm inclined to think so, Ms. Chaytor, but	20		briefing note. And Ms. Predham has given you
some of these details are very hard for me to	21		some detail here.
remember, given the lapse in time.	22	MS. HE	ENNESSEY:
LOS CHANTON O C	100		Vac

A. Yes.

24 CHAYTOR, Q.C.:

Q. And this e-mail is at five p.m. on Friday,

23

25

line of questioning?

Q. Did anybody ever ask you not to pursue that

24

25

23 CHAYTOR, Q.C.:

Pa	g	ϵ	2
----	---	------------	---

- November 4th, and it continues at the end with 1
- 2 "I understand that Dr. Williams has attempted
- to reach you to discuss the quality review. 3
- He will be following up with you on Monday. If 4
- you need further information, I will be happy 5
- to get it to you." And then if we could look 6
- please at P-1441, and Ms. Hennessey, this is 7
- 8 an e-mail--your reply is at the top, but the
- e-mail from Ms. Predham, and I take it you 9
- 10 know Ms. Predham fairly well as well? You
- know Ms. Predham? 11
- 12 MS. HENNESSEY:
- A. I know Ms. Predham. I don't know her well like 13 I know Dr. Williams and Mr. Tilley. 14
- 15 CHAYTOR, O.C.:
- Q. Okay. She's e-mailing to Dr. Williams and to 16
- yourself, and this is November 4th 2005, 4:59 17
- p.m. So it's one minute before her other e-18
- mail to you and this one is going to your 19
- blackberry address, and if we read down 20
- through it, it's basically all the same 21
- 22 content in a different format as the other
- 23 one. But if we go back just for a second to
- P-0098, this one is one minute later at your 24
- gov.nl address and has more detail, and 25

- includes this information regarding patients 1
- 2
- Williams having attempted to reach you. Do 3
- you know why you received these two somewhat 4
- 5 similar e-mails from Ms. Predham within a
- minute of one another? 6

7 MS. HENNESSEY:

- 8

10 CHAYTOR, Q.C.:

- 11 Q. Well, one--they're basically the same, except

- without all of the information. Do you know 15
- what the significance is of a letter at the 16
- seen that on other e-mails? 18
- 19 MS. HENNESSEY:
- 20 A. No, I don't.
- 21 CHAYTOR, Q.C.:
- Q. Okay, all right, and this particular e-mail
- exchange, we've received this from Ms. 23
- Predham. These are copies from Ms. Predham, 24
- and I understand you have not been able to 25

- find your copies of these e-mails. Is that
- right?
- 3 MS. HENNESSEY:
- A. I don't--I couldn't find them when we were
- 5 providing information to the Commission.
- 6 CHAYTOR, Q.C.:
- Q. Okay. So those weren't--you weren't able to
- find them on the government's system, this e-8
- mail exchange?
- 10 MS. HENNESSEY:
- A. I wasn't able to find this particular e-mail. 11
- 12 CHAYTOR, Q.C.:
 - Q. Ms. Hennessey, are there other e-mails that
- you feel are missing from your communications 14
- on this issue? 15
- 16 MS. HENNESSEY:
- A. Ms. Chaytor, initially I did my own e-mail 17
- search and I provided the information that I 18
 - could find. Then subsequent to that, the
- government did a search of my e-mail. 20
- 21 CHAYTOR, Q.C.:

19

24

2

- 22 Q. Yes, okay. But I'm just thinking in terms of
- messages that you recollect or communications 23
 - that you recollect which--for example, this
- one from Ms. Predham--are there others that 25

Page 102

- from St. Pierre and the point about Dr.
- A. No, I don't know why. I think one may have
- been just an update of another. 9
- if we could just go back then to 1441, you 12
- might just want to keep them both open, 13
- Registrar, or diminished. This one ends 14

- 17 end of the communication, the W? Have you

- 22

Page 104

Page 103

- you have a sense there were more, but you no 1
 - longer have them in your system?
- 3 MS. HENNESSEY:
- A. I don't have a general sense. I think that 4
- 5 you would have--now, unless I go back and do a
- further search of my e-mail. 6
- 7 CHAYTOR, Q.C.:
- Q. I'm just wondering based on your own 8
- recollections of, you know, back and forth and 9
- information to Eastern Health or to others 10
- 11 within the Department, if you have the sense
- that well perhaps there are others that may no 12
- 13 longer exist?
- 14 MS. HENNESSEY:
- A. I don't have a general sense that there's e-15 mails missing, but, you know, if you're asking 16
- me to go back and search my e-mails again, I 17
- certainly can. 18
- 19 CHAYTOR, Q.C.:
- Q. No, I understand that has been done. I'm just 20
- wondering if there's anything that's not--that 21
- you can recall which doesn't exist in e-mails 22
- traffic that may, at some point, have been. 23 Like there's nothing sticks out in your mind, 24
- 25 I take it, that -

1 MS. HENNESSEY:

- 2 A. There's nothing that sticks out in my mind.
- 3 CHAYTOR, Q.C.:
- 4 Q. you received information through e-mail
- 5 which no longer is on your system?
- 6 MS. HENNESSEY:
 - A. No, but I certainly am quite prepared to go
- 8 have another look if you wish me to do so.
- 9 CHAYTOR, Q.C.:
- 10 Q. I understand that's been done.
- 11 MS. HENNESSEY:
- 12 A. Yeah.
- 13 THE COMMISSIONER:
- 14 Q. Ms. Chaytor, wherever you can find a
- convenient spot, we'll take the morning break.
- 16 CHAYTOR, Q.C.:
- 17 Q. Okay, thank you. Well, perhaps we can end
- there for now.
- 19 THE COMMISSIONER:
- 20 Q. All right. Take 15 minutes.
- 21 (RECESS)
- 22 THE COMMISSIONER:
- 23 Q. Please be seated. Ms. Chaytor.
- 24 CHAYTOR, Q.C.:
- 25 Q. Thank you, Commissioner. If we could bring up

- 1 Q. You don't recall or--so what period of time
 - 2 did you use pin messaging and when did you

Page 107

Page 108

- 3 stop pin messaging?
- 4 MS. HENNESSEY:
- 5 A. I don't know if I can recall specifically.
- 6 It's a good while since I've used pin
 - messaging.
- 8 CHAYTOR, Q.C.:

7

- 9 Q. And is this a pin message?
- 10 MS. HENNESSEY:
- 11 A. No, this is not a pin message.
- 12 CHAYTOR, Q.C.:
- Q. This is not a pin message?
- 14 MS. HENNESSEY:
- 15 A. No. I mean, this information, I would have
- received on my desktop, as far as I know.
- 17 CHAYTOR, Q.C.:
- 18 Q. This one is coming to you on your blackberry.
- 19 MS. HENNESSEY:
- 20 A. Okay.
- 21 CHAYTOR, Q.C.:
- 22 Q. This one, see how it's coming to you on your
- 23 blackberry?
- 24 MS. HENNESSEY:
 - 25 A. Yeah, I wouldn't have received a pin message

Page 106

- again, please, 1441? This is the e-mail that
- 2 you received from Ms. Predham.
- 3 MS. HENNESSEY:
- 4 A. Yes.
- 5 CHAYTOR, Q.C.:
- 6 Q. And I was asking you about the fact that you
- 7 received two very similar e-mails within a
- 8 minute of each other, and this one appears--
- 9 this is the earlier one and it appears to end
- without completion. Ms. Hennessey, do you
- either use your blackberry to send or receive
- pin messages?
- 13 MS. HENNESSEY:
- 14 A. I don't use my blackberry for pin messages.
- 15 CHAYTOR, Q.C.:
- 16 Q. And at this period of time, had you used or
- received pin messaging?
- 18 MS. HENNESSEY:
- 19 A. I have in the past received pin messages.
- 20 CHAYTOR, O.C.:
- 21 Q. Yes, and at this period of time, in 2005?
- 22 MS. HENNESSEY:
- 23 A. I don't recall using pin messaging at that
- time.
- 25 CHAYTOR, Q.C.:

1 from Eastern Health.

- 2 CHAYTOR, O.C.:
- 3 Q. Have you ever received pin messages from
- 4 Eastern Health?
- 5 MS. HENNESSEY:
- 6 A. No. I haven't.
- 7 CHAYTOR, Q.C.:
- 8 Q. Okay, and have you used pin messaging in
- 9 dealing with the ER/PR issue?
- 10 MS. HENNESSEY:
- 11 A. No, not that I can recall.
- 12 CHAYTOR, Q.C.:

14

- 13 Q. Now if we could look at, please, P-0098? It's
 - the longer version of the message, and this
- one appears that it did go to your desktop.
- 16 It's the gov.nl address, and this is where she
- indicates that Dr. Williams is attempting to
- reach you regarding the quality review. He's
- going to follow up on Monday, and I believe
- you indicated that, in your evidence earlier
- 21 this morning, you believe that Dr. Williams
 - did speak with you or you spoke with Dr.
- 23 Williams?
- 24 MS. HENNESSEY:
- 25 A. Yes.

Page 109 Page 111 1 CHAYTOR, O.C.: 1 THE COMMISSIONER: Q. Okay, and what do you recall in that Q. Or even recall having a discussion with him discussion with Dr. Williams? about this? 3 3 4 MS. HENNESSEY: 4 MS. HENNESSEY: A. Ms. Chaytor, I don't recall the details of the 5 5 A. I would think if Dr.--if Heather's e-mail says discussions with Dr. Williams at that time. that Dr. Williams would follow up with me on 6 6 Monday, I found Dr. Williams to be reliable, 7 CHAYTOR, O.C.: 7 Q. Okay. Now he's going to follow up. You had 8 8 so I would tend to think that he did call me. two main questions? 9 CHAYTOR, O.C.: 10 MS. HENNESSEY: Q. Well, it says he will be following up with you 10 A. Yes. 11 11 on Monday. 12 CHAYTOR, Q.C.: 12 MS. HENNESSEY: Q. One was the patient contact and how that's A. Yes. 14 going. 14 CHAYTOR, Q.C.: 15 MS. HENNESSEY: Q. And she's writing this on the Friday. 15 A. Right. 16 MS. HENNESSEY: 16 A. Friday, yes. 17 CHAYTOR, Q.C.: 17 Q. And Ms. Predham has given you -18 CHAYTOR, Q.C.: 19 MS. HENNESSEY: Q. So what's your recollection though? Do you A. The information on that. recall that you actually spoke with Dr. 20 20 21 Williams? 21 CHAYTOR, Q.C.: Q. - some detail on that. 22 MS. HENNESSEY: A. I can't recall specifically whether I spoke to 23 MS. HENNESSEY: 23 him on that Monday, but I did speak to Dr. A. Right. 24 Williams during that time period. 25 CHAYTOR, Q.C.: 25 Page 110 Page 112 Q. Through those e-mails. And the thing that Dr. 1 CHAYTOR, Q.C.: 1 Williams is going to follow up with you or his Q. And did your discussions concern your question 2 attempting to call you about is the second of what were the general findings from the 3 3 question, I take it, about the findings, external reviewers? 4 4 general findings from the two reviews. 5 MS. HENNESSEY: 5 6 MS. HENNESSEY: A. I would tend to think that that perhaps was 6 the focus, but I don't recall. A. Yes. 7 7 8 CHAYTOR, O.C.: 8 CHAYTOR, O.C.: Q. So is that what you recall discussing with Dr. Q. And why do you tend to think that was the 9 9 Williams? focus? 10 10 11 MS. HENNESSEY: 11 MS. HENNESSEY: A. I don't recall the details around this A. Because when I sent the e-mail asking the 12 12 question, I would tend to think that we would 13 particular issue, but there is a reference in 13 our briefing note of November 7th which would have discussed that matter. 14 14 lead me to conclude that it would have come 15 CHAYTOR, O.C.: 15 from information provided by Dr. Williams. Q. And in terms of any detail around that 16 16 discussion and what Dr. Williams told you, 17 CHAYTOR, Q.C.: 17 Q. So other than what reference you then have in you're not able to say? 18 18 the briefing note, you have no recollection of 19 MS. HENNESSEY: 19 any discussion with Dr. Williams to answer A. No, I don't recall the details. There are 20 20 certain periods during this file when my your question of what were the general 21 21 findings? recall is better than others. 22 22 23 CHAYTOR, Q.C.: 23 MS. HENNESSEY:

24

25

Q. Ms. Hennessey, if Dr. Williams had--have you

since seen the external review reports?

that discussion.

A. No, I don't have any clear recollection of

24

Page 115 MS. HENNESSEY: 2 0 0 quality control interpretation of HC 2 No. 1 haven'l. 3 0 0 quality control interpretation of HC 3 No. 1 1 0 0 quality control interpretation of HC 4 No. 1 No. 1 1 1 1 1 1 1 1 1 1	I	27, 2000 Multi	-1 (age inquiry on Hormone Receptor Testing
2 A. No, I haven't. 3 CHAYTOR, Q.C. 4 Q. You've never seen them. 5 MS. HENNESSEY: 9 And this report is dated October 17th, 2005 10 and it is the report of Dr. Banerjee. It's 11 the actual report here, the cover page. 12 MS. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. Oshy. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and the the comes to conclusions about the reasons of the things. You'll see as I'm scrolling down here, he has a number of headings, and then he has a list of other will have been-I do not recall bar? 7 MS. HENNESSEY: 16 Q. Oshy. If we could bring up P-0046, please? 9 And this report is dated October 17th, 2005 10 and it is the report of Dr. Banerjee. It's the the care are the cover page. 12 MS. HENNESSEY: 15 Q. So this is the first time you're seeing this document? 16 document? 17 MS. HENNESSEY: 18 A. Yes, It is. 19 CHAYTOR, Q.C.: 19 Q. Oshy. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and then he has a list of other of you think you would recall that? 18 A. Right. 19 CHAYTOR, Q.C.: 19 Q. Oshy. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and the he comes to conclusions about the reasons of the text failure. "1.1 Is the DAKO system to standardized in all of the false negative cases. 19 Is the Ventana system to scrositive?" is method and antibody detection system that triation, as positive controls showed weak staining and general and internal controls at attention paid by the grossing pathologists to the status of internal at attention paid by the grossing pathologists to the status of internal controls," and then 6, which should be 5, many the pathologists to the status of internal controls, "and then 6, which should be 5, many the pathologists to the status of internal controls," and then 6, which should be 5, many the pathologists to the status of internal co		Page 113		Page 115
3 CHAYTOR, Q.C.: 4 Q. You've never seen them. 5 MS. HENNESSEY: 6 A. No. 7 CHAYTOR, Q.C.: 8 Q. Okay. If we could bring up P-0046, please? 9 And this report is dated October 17th, 2005 10 and it is the report of Dr. Banerjee. It's 11 the actual report here, the cover page. 12 MS. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this 16 document? 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling of the things. You'll see as I'm scrolling then the comes to conclusions about the reasons of free trailure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 10 Isaboratories using the DAKO system 25 faulty? This is unlikely as there are many 11 aboratories using the DAKO system 25 faulty? This is unlikely as there are many 12 method and antibody detection system 4 traiting, and general and internal controls failure was most likely due to a lack of test optimization, including antigen retrieval 5 method and antibody detection system 10 volume two. "There is no evidence that the 1 Ventana system creates lake positive results. 12 Learnes of the thickness of the tissue slices, quality and and equacy of fixation, and there is no 1 vitancing antigen retrieval 5 method and antibody detection system 15 the thickness of the tissue slices, quality and antibody detection system 16 volume two. "There is no evidence that the 17 ventana system creates lake positive results. 18 chartory and the work of the 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 18 incheding not then, Ms. 17 better education required for 20 chartory and the work of the 19 pathologists to the status of internal 20 controls," and then 6, which should be 5, 18 incheding not then, Ms. 18 A. Think I would recall that? In this work bring is failed in all of the false negative cases. 18 the volume and the retrieval that because the province of the chartory in the province of t	1 M	S. HENNESSEY:	1	of quality control interpretation of IHC
Solition	2	A. No, I haven't.	2	results." And then he has a list of other
5 M.S. HENNESSEY: 6 A. No. 7 CHAYTOR, Q.C.: 8 Q. Okay. If we could bring up P-0046, please? 9 And this report is dated October 17th, 2005 10 and it is the report of Dr. Banerjee. It's the actual report bere, the cover page. 11 M.S. HENNESSEY: 12 M.S. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this document? 15 M.S. HENNESSEY: 16 A. Yes, it is. 19 CHAYTOR, Q.C.: 19 C. Do you even tot lold the findings from this decument? 10 Gow here, he has a number of headings, and then he comes to conclusions about the reasons for test failure. "11. Is the DAKO system for test failure." "11. Is the DAKO system for test failure." "11. Is the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval failure was most likely due to a lack of test optimization, including antigen retrieval failure www. "There is no evidence that the town." There is no evidence that the town. "There is no evidence that the town." There appears to be inadequate attention paid by the grossing pathologists to the status of internal controls," and then 6, which should be 5, "Import part of the status of internal controls," and then 6, which should be 5, "Import part of the status of internal controls," and then 6, which should be 5, "Import part of the status of internal controls," and then 6, which should be 5, "Import part of the status of internal controls," and then 6, which should be 5, "Import part of the status of internal controls," and then 6, which should be 5, "Import part education required for "2, Okan Manager parts" (2) A. No. I Carter, at one point she described the external review had been very of this detail was shared with me. 4 CHAYTOR, Q.C.: 2 M. HENNESSEY: 3 Is there a problem with tissue should be 5, "Import part of the laboratory and the work of the pottoning of the status of internal controls," and then 6, which should be 5, "Import part of the laboratory and the work of the pottoning of the status of internal c	3 CI	HAYTOR, Q.C.:	3	system flaws, seven other things notes there.
6 A No. 7 CHAYTOR,Q.C.: 8 Q. Okay. If we could bring up P-0046, please? 9 And this report is dated October 17th, 2005 10 and it is the report of Dr. Baneriee, It's 11 the actual report here, the cover page. 12 MS. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this 16 document? 17 MS. HENNESSEY: 19 CHAYTOR, Q.C.: 19 Q. Doy owere not told the findings from this 16 document? 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and then be comes to conclusions about the reasons for test failure. "1. Is the DAKO system 24 for test failure." 1. Is the DAKO system 25 most likely due to a lack of test optimization, including antigen retrieval optimization, including antigen retrieval full virtuition, as positive controls showed weak staining and general and internal controls failure was failure and system creates false positive results. 10 Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive cases. 19 Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 21 G. HAYTOR, Q.C.: 22 G. P. Okay. I'm just going to take you through some of the things, You'll see as I'm scrolling to the ventana system to sensitive?" is number two. "There is no evidence that the Ventana system creates false positive cases. 19 Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 21 G. HAYTOR, Q.C.: 22 G. M. Hennessey, we know from correspondence of the laboratory and the work of the external review had been very critical of the laboratory and the work of the external review shad been very critical of the laboratory and the work of the external review shad been very critical of the laboratory and the work of the external review shad been very critical of	4	Q. You've never seen them.	4	If your discussion had included Dr.
CHAYTOR, Q.C.: 8 Q. Okay. If we could bring up P-0046, please? 10 and it is the report is dated October 17th, 2005 on and it is the report of Dr. Banerjee. It's 11 the actual report here, the cover page. 12 MS. HENNESSEY: 13 A. Right. 15 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this 16 document? 16 MS. HENNESSEY: 17 MS. HENNESSEY: 17 MS. HENNESSEY: 18 A. Yes, it is. 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 19 CHAYTOR, Q.C.: 19 CHAYTOR, Q.C.: 10 Q. Okay. I'm just going to take you through some 21 of the things. You'll see as I'm scrolling dathen he comes to conclusions about the reasons 24 for test failure. "1. Is the DAKO system 25 faulty? This is unlikely as there are many 25 most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system 6 titration, as positive controls showed weak 15 failed in all of the false negative cases. 19 Is the Ventana system too sensitive?" is no number two. "There is no evidence that the 11 Ventana system creates false positive results, 13 fixation? There appears to be inadequate attention paid by the grossing pathologists to the status of internal controls," and then 6, which should be 5, 18 on a tention is being paid by the reporting 19 pathologist to the status of internal controls," and then 6, which should be 5, 18 on a mention is being paid by the reporting 19 pathologists to the status of internal controls," and then 6, which should be 5, 18 on a mention is being paid by the reporting 19 pathologists to the status of internal controls," and then 6, which should be 5, 18 on a mention is being paid by the reporting 19 pathologists to the status of internal controls," and then 6, which should be 5, 18 on a machine is being paid by the reporting 19 pathologists to the status of internal controls," and then 6, which should be 5, 18 on a machine is being paid by the reporting 19 pathologists to the status of internal controls," and then 6, which should be 5, 18 on a machine is being paid by the re	5 M	S. HENNESSEY:	5	Williams pointing these things out to you, do
8 Q. Okay. If we could bring up P-0046, please? And this report is dated October 17th, 2005 10 and it is the report of Dr. Banerice. It's 11 the actual report here, the cover page. 12 MS. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this 16 document? 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. Tn just going to take you through some 21 of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then he comes to conclusions about the reasons 24 for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 26 most likely due to a lack of test 40 optimization, including antigen retrieval 5 method and antibody detection system 40 optimization, as positive controls showed weak 51 staining and general and internal controls 52 failed in all of the false negative cases. 53 Is the Ventana system creates false positive results. 54 Is the Ventana system creates false positive results. 55 Is the Ventana system creates false positive results. 56 Is the thickness of the tissue slices, quality 57 In and adequacy of fixation, and there is no 58 failed in all of the false negative cases. 59 Is the Ventana system creates false positive results. 51 Is the Ventana system controls showed weak 55 trained in all of the false negative cases. 51 Is the Ventana system controls showed weak 58 failed in all of the false negative cases. 51 Is the Ventana system controls showed weak 52 staining and general and internal controls 53 failed in all of the false negative cases. 54 Is the ventana system controls showed weak 55 the thickness of the tissue slices, quality 66 and an antibody detection system 67 the thickness of the sting paid by the grossing pathologists to the status of internal 68 or no attention is being paid by the reporting 69 pathologist to the status of internal 60 controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and 21 central revi	6	A. No.	6	you think you would recall that?
And this report is dated October 17th, 2005 and it is the report of Dr. Banerjee. It's and it is the report of Dr. Banerjee. It's the actual report here, the cover page. 2 MS. HENNESSEY: 3 A Right. 4 CHAYTOR, Q.C. 5 O So this is the first time you're seeing this 6 document? 6 MS. HENNESSEY: 8 A. Yes, it is. 9 CHAYTOR, Q.C. 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling 21 down here, he has a number of headings, and 22 then he comes to conclusions about the reasons 6 for test failure. "1. Is the DAKO system 25 faulty? This is unlikely as there are many 26 successfully. The reason for test failure was 3 most likely due to a lack of test 4 optimization, including amtigen retrieval 5 method and antibody detection system 6 titration, as positive controls showed weak 7 staining and general and internal controls 8 failed in all of the false negative cases. 9 Is the Ventana system too sensitive?" is number two. "There is no evidence that the 11 Ventana system creates false positive results. 12 a. Is there a problem with tissue 13 fixation? There appears to be inadequate 14 attention paid by the grossing pathologists to 15 the thickness of the tissue slices, quality 16 and adequacy of fixation, and there is no 17 standardized fixation protocol, 4. Inadequate 18 or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 10 memorporiate choice of blocks with no 21 representative normal ductal epithelium," and 22 checknologists, pathologists and clinicians 23 memory of the search of the status of internal 24 controls, successfully to the status of internal 25 controls," and then 6, which should be 5, 16 memorphy of the section of the status of internal 26 controls," and then 6, which should be 5, 17 memorphy of the choice of blocks with no 27 representative normal ductal epithelium," and 28 charlencessey, that you prepare, and it's prepared 29 pathologists to the status of internal 20 controls," and th	7 CI	HAYTOR, Q.C.:	7	MS. HENNESSEY:
In the actual report here, the cover page. 11	8	Q. Okay. If we could bring up P-0046, please?	8	A. I think I would recall some of this.
the actual report here, the cover page. 11	9	And this report is dated October 17th, 2005	9	CHAYTOR, Q.C.:
12 MS. HENNESSEY: 13 A. Right. 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this document? 16 document? 17 In January 18 J. Event 19 CHAYTOR, Q.C.: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and down here, he has a number of headings, and down here, he has a number of headings, and last including an unique of the things. You'll see as I'm scrolling down here, he has a number of headings, and last including an unique of the things. You'll see as I'm scrolling laboratories using the DAKO system successfully. The reason for test failure was many laboratories using the DAKO system of tikely due to a lack of test optimization, including antigen retrieval full time and antibody detection system tikely due to a lack of test optimization, including antigen retrieval staining and general and internal controls failed in all of the false negative cases. Is Is there a problem with tissue lattention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequate of fixation, and there is no attention is being paid by the reporting pathologist to the status of internal controls, "and then 6, which should be 5, laboratories to the chickness of the tissue slices, quality and adequacy of fixation, and there is no representative normal ductal epithelium," and controls," and then 6, which should be 5, laboratories to the chickness of the cissue slices, quality and adequacy of fixation, and there is no representative normal ductal epithelium," and controls," and then 6, which should be 5, laboratory and the controls, and there is no representative normal ductal epithelium," and controls, and then 6, which should be 5, laboratory in the growing and clinicians to the chickness of the sistent slices, quality and adequate of fixation protocol,	10	and it is the report of Dr. Banerjee. It's	10	Q. So your e-mail is November 3rd. So the
13 you were not told the findings from this 14 CHAYTOR, Q.C.: 15 Q. So this is the first time you're seeing this 16 document? 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 19 CHAYTOR, Q.C.: 20 Q. Okay, I'm just going to take you through some 21 of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then he comes to conclusions about the reasons 24 for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 26 successfully. The reason for test failure was 3 most likely due to a lack of test 4 optimization, including antigen retrieval 5 method and antibody detection system 6 titration, as positive controls showed weak 7 staining and general and internal controls 8 failed in all of the false negative cases. 9 Is the Ventana system too sensitive?" is 10 number two. "There is no evidence that the 11 Ventana system creates false positive results. 12 3. Is there a problem with tissue 13 fixation? There appears to be inadequate 14 attention paid by the grossing pathologists to the thickness of the tissue slices, quality 16 and adequacy of fixation, and there is no 17 technologists, pathologists to the status of internal 18 or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 21 "inappropriate choice of blocks with no representative normal ductal epithelium," and 22 technologists, pathologists and clinicians 24 technologists, pathologists and clinicians 25 the technologists, pathologists and clinicians 26 the findings from the report? 27 total any of these details. 28 LENATOR, Q.C. 29 Q. Do you recall being told any of these details. 29 (M. HENNESSEY: 20 MS. HENNESSEY: 21 MS. HENNESSEY: 21 A. I think I would recall if some of this detail 21 MS. HENNESSEY: 22 A. I think I would recall if some of this detail 23 was shared with me. 24 CHAYTOR, Q.C.: 3 (CHAYTOR, Q.C.: 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described	11	the actual report here, the cover page.	11	beginning of November, any discussion you had
14 CHAYTOR, Q.C. 15 Q. So this is the first time you're seeing this 16 document? 17 MS. HENNESSEY: 16 A. Yes, it is. 18 CHAYTOR, Q.C. 19 CHAYTOR, Q.C. 19 Q. O day, I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and 12 down here, he has a number of headings, and 13 down here, he has a number of headings, and 14 report? 15 MS. HENNESSEY: 16 MS. HENNESSEY: 17 told any of these details. 18 CHAYTOR, Q.C. 19 Q. Do you recall being told any detail? 20 MS. HENNESSEY: 2 CHAYTOR, Q.C. 21 A. No, I can't recall. 22 chayTOR, Q.C. 2 CHAYTOR, Q.C. 23 most likely due to a lack of test 4 optimization, including antigen retrieval 5 method and antibody detection system 6 titration, as positive controls showed weak 5 staining and general and internal controls 8 failed in all of the false negative cases. 9 Is the Ventana system too sensitive?" is 9 mumber two. "There is no evidence that the 11 Ventana system creates false positive results. 12	12 M	S. HENNESSEY:	12	with Dr. Williams, is it fair to conclude that
15 Q. So this is the first time you're seeing this document? 16 document? 17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 19 Q. Do you recall being told any detail? 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and then he comes to conclusions about the reasons and then he comes to conclusions about the reasons and then he comes to conclusions about the reasons and then he comes to conclusions about the reasons and the faulty? This is unlikely as there are many are professionally. The reason for test failure was a most likely due to a lack of test and titration, as positive controls showed weak a failed in all of the false negative cases. 10 In the failed in all of the false negative cases. 11 In the failed in all of the false negative cases. 12 Is the Ventana system too sensitive?'' is number two. "There is no evidence that the attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologists to the status of internal controls," and then 6, which should be 5, imappropriate choice of blocks with no representative normal ductal epithelium," and controls, and then 6, which should be 5, imappropriate choice of blocks with no representative normal ductal epithelium," and cethnologists, pathologists and clinicians to the technologists, pathologists and clinicians to the technologists, pathologists and clinicians to the date of the analysis of the status of internal controls," and then 6, which should be 5, imappropriate choice of blocks with no representative normal ductal epithelium," and cethnologists, pathologists and clinicians to the cethnologists, pathologists and clinicians to the case and through of the seatestile. 15 MS. HENNESSEY: 16 A. I would not have beenI do not recall teins. 22 CHAYTOR, Q.C.: 23 Ns. HENNESSEY: 24 CHAYTOR,	13	A. Right.	13	you were not told the findings from this
16 document? 17 MS, HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some 21 of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then he comes to conclusions about the reasons 24 for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 26 recently. The reason for test failure was 3 most likely due to a lack of test 4 optimization, including antigen retrieval 4 optimization, as positive controls showed weak 27 staining and general and internal controls 28 failed in all of the false negative cases. 9 Is the Ventana system too sensitive?" is 10 number two. "There is no evidence that the 11 Ventana system creates false positive results. 12 3. Is there a problem with tissue 41 attention paid by the grossing pathologists to the thickness of the tissue slices, quality 16 and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate 18 or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 21 "inappropriate choice of blocks with no representative normal ductal epithelium," and 22 technologists, pathologists and clinicians 16 technologists, pathologists and clinicians 17. better education required for 24 technologists, pathologists and clinicians 16 technologists, pathologists and clinicians 17. better education required for 24 technologists, pathologists and clinicians 18 to 4 No. I can't say I was given that sense. 19 Ok. HENNESSEY: 20 A. I think I would recall if some of this detail 20 ChAYTOR, Q.C.: 21 Ns. HENNESSEY: 22 A. I think I would recall if some of this detail 3 was shared with me. 24 CHAYTOR, Q.C.: 50 Q. M. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external review reports as being fairly damning reports. Were you ever given the sense that the external rev	14 CI	HAYTOR, Q.C.:	14	report?
17 MS. HENNESSEY: 18 A. Yes, it is. 19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some 21 of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then be comes to conclusions about the reasons 24 for test failure. "1. Is the DAKO system 25 faulty? This is unlikely as there are many 25 recall? Page 114 1 laboratories using the DAKO system 26 successfully. The reason for test failure was 3 most likely due to a lack of test 4 optimization, including antigen retrieval 5 method and antibody detection system 6 titration, as positive controls showed weak 6 failed in all of the false negative cases. 8 Is the Ventana system too sensitive?" is 9 sense that the external review reports as being fairly admining reports. Were you ever given the 2 sense that the external review had been told the findings from the 22 reports, is that something you think you would 25 recall? Page 114 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 21 A. No, I can't recall. 22 CHAYTOR, Q.C.: 23 Q. If you had been told the findings from the 22 reports, is that something you think you would 25 recall? Page 114 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 21 A. No, I can't recall. 22 CHAYTOR, Q.C.: 23 Q. If you had been told the findings from the 24 reports, is that something you think you would 25 recall? Page 114 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 2 A. I think I would recall if some of this detail 4 mass shared with me. 4 CHAYTOR, Q.C.: 5 Q. MS. HENNESSEY: 2 A. I think I would recall if some of this detail 4 mass shared with me. 4 CHAYTOR, Q.C.: 2 A. I think I would recall if some of this detail 4 mass shared with me. 4 CHAYTOR, Q.C.: 5 Q. MS. HENNESSEY: 2 A. I think I would recall if some of this detail 4 mass shared with me. 4 CHAYTOR, Q.C.: 2 A. I think I would recall if some of this detail 4 ma	15	Q. So this is the first time you're seeing this	15	5 MS. HENNESSEY:
18 CHAYTOR, Q.C.: 19 Q. Do you recall being told any detail? 20 MS. I'm just going to take you through some 21 of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then he comes to conclusions about the reasons 24 for test failure. "I. Is the DAKO system 25 failure. "I. Is the DAKO system 26 the profit of the things. You'll see as I'm scrolling 22 dehartore, Q.C.: 23 Q. If you had been told the findings from the 25 reports, is that something you think you would 26 recall? 27 recall? 28 reports, is that something you think you would 26 recall? 28 reports, is that something you think you would 27 recall? 28 reports, is that something you think you would 28 reports, is that something you think you would 29 recall? 29 recall? 29 recall? 20 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 21 A. I think I would recall if some of this detail 28 was shared with me. 40 CHAYTOR, Q.C.: 40 CHAYTOR, Q.C.: 41 MS. HENNESSEY: 42 Reports, is that something you think you would 40 recall? 40 records, was shared with me. 40 CHAYTOR, Q.C.: 41 MS. HENNESSEY: 41 MS. HENNESSEY: 42 MS. HENNESSEY: 43 MS. HENNESSEY: 40 MS. HENNESSEY:	16	document?	16	A. I would not have beenI do not recall being
19 CHAYTOR, Q.C.: 20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling 22 down here, he has a number of headings, and 23 then he comes to conclusions about the reasons 24 for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 26 faulty? This is unlikely as there are many 27 recall? Page 114 Page 116 1 laboratories using the DAKO system 27 successfully. The reason for test failure was 38 most likely due to a lack of test 40 optimization, including antigen retrieval 55 method and antibody detection system 40 titration, as positive controls showed weak 47 staining and general and internal controls 48 failed in all of the false negative cases. 49 Is the Ventana system too sensitive?" is 10 number two. "There is no evidence that the 11 Ventana system crates false positive results. 12 3. Is there a problem with tissue 41 tention paid by the grossing pathologists to the thickness of the tissue slices, quality 16 and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 21 "inappropriate choice of blocks with no representative normal ductal epithelium," and 22 "C.HAYTOR, Q.C.: 10 MS. HENNESSEY: 21 A. No, I can't recall. 22 CHAYTOR, Q.C.: 23 Q. If you had been told the findings from the reports, is that something you think you would 25 recall? 24 technologists, and then a name and proposed it. 21 MS. HENNESSEY: 25 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of 6 Dr. Carter, at one point she described the external review reports as being fairly 8 damning reports. Were you ever given the sense that the external review shad been very 12 MS. HENNESSEY: 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight,	17 M	S. HENNESSEY:	17	told any of these details.
20 Q. Okay. I'm just going to take you through some of the things. You'll see as I'm scrolling down here, he has a number of headings, and then he comes to conclusions about the reasons for test failure. "I. Is the DAKO system 24 for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 25 recall? Page 114 laboratories using the DAKO system 26 successfully. The reason for test failure was 27 most likely due to a lack of test 38 most likely due to a lack of test 39 most likely due to a lack of test 40 optimization, including antigen retrieval 59 method and antibody detection system 50 titration, as positive controls showed weak 61 staining and general and internal controls 62 failed in all of the false negative cases. 63 Is the Ventana system too sensitive?" is 61 number two. "There is no evidence that the 61 Ventana system creates false positive results. 63 Is there a problem with tissue 61 the thickness of the tissue slices, quality 62 and adequacy of fixation, and there is no 63 standardized fixation protocol. 4. Inadequate 64 or no attention is being paid by the reporting 65 pathologist to 66 the status of internal 67 miles or no attention is being paid by the reporting 67 pathologists, and then 6, which should be 5, 62 miles of the discussion of the status of internal 68 miles of the discussion of the status of internal 69 miles and clinicians 60 miles find the findings from the 60 miles and 20 miles find the reasons 61 miles find the resons 61 miles find the same something voluminal 62 miles findings from the 70 miles fi	18	A. Yes, it is.	18	3 CHAYTOR, Q.C.:
of the things. You'll see as I'm scrolling down here, he has a number of headings, and then he comes to conclusions about the reasons the ne comes to conclusions about the reasons the ne comes to conclusions about the reasons the ne comes to conclusions about the reasons of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate the fixed pathologists to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and 2.3 M. No. I can't recall. 2.2 CHAYTOR, Q.C.: 2.3 Q. If you had been told the findings from the reports, is that something you think you would recall? 2.3 Q. If you had been told the findings from the reports, is that something you think you would recall? 2.4 Page 116 1.5 MS. HENNESSEY: 1.5 Q. Ms. Hennessey, we know from correspondence of this detail one optimization, including antigen retrieval and antibody detection system titration, as positive controls showed weak of titration, as positive controls showed weak failed in all of the false negative cases. 2.5 Is the Ventana system too sensitive?" is number two. "There is no evidence that the total pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians of the control of the laboratory and the work of the laboratory and	19 CI	HAYTOR, Q.C.:	19	Q. Do you recall being told any detail?
down here, he has a number of headings, and then he comes to conclusions about the reasons for test failure. "I. Is the DAKO system and patch the status of internal controls or no attention is being pathologists to the thickness of the tissue slices, quality and addequacy of fixation paid by the grossing pathologists to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for test failure, as past lake positive controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for test failure," is the same and the past on south the reasons to conclusions about the reasons for test failure, "I. Is the DAKO system the page 114 reports, is that something you think you would 225 recall? 23 Q. If you had been told the findings from the reports, is that something you think you would 25 recall? 24 reports, is that something you think you would 25 recall? 25 Page 116 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of 24 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of 25 Q. Ms. Hennessey, we know from correspondence of 26 Dr. Carter, at one point she described the 26 CHAYTOR, Q.C.: 15 A. I tain't I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, 27 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 Ms. HENNESSEY: 24 A. I think I would recall if some of this detail 4 CHAYTOR, Q.C.: 25 A. I think I would recall if some of this detail 4 CHAYTOR, Q.C.: 26 Dr. Carter, at one point she described the 27 CHAYTOR, Q.C.: 27 A. I think I would recall if some of this detail 4 CHAYTOR, Q.C.: 28 A. I think I would recall if some of this detail 4 CHAYTOR, Q.C.: 29 A. I think I would recall	20	Q. Okay. I'm just going to take you through some	20	MS. HENNESSEY:
then he comes to conclusions about the reasons for test failure. "I. Is the DAKO system 25 faulty? This is unlikely as there are many 26 recall? Page 114 I laboratories using the DAKO system 27 successfully. The reason for test failure was 28 most likely due to a lack of test 38 most likely due to a lack of test 39 method and antibody detection system 39 titration, as positive controls showed weak 30 method and antibody detection system 39 failed in all of the false negative cases. 30 number two. "There is no evidence that the 31 Ventana system creates false positive results. 31 Is there a problem with tissue 31 fixation? There appears to be inadequate 41 attention paid by the grossing pathologists to 59 the thickness of the tissue slices, quality 40 and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate 40 or no attention is being paid by the reporting 40 pathologists to the status of internal 41 controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for 40 technologists, pathologists and clinicians 40 technologists, pathologists and clinicians 40 technologists, pathologists and clinicians 41 technologists, pathologists and clinicians 42 technologists, is that something you think you would 72 recall? Page 116 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 32 was shared with me. 4 CHAYTOR, Q.C.: 2 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 44 chaytor, Q.C.: 2 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 44 chaytor, Q.C.: 2 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 44 chaytor, Q.C.: 2 MS. HENNESSEY: 2 A. I	21	of the things. You'll see as I'm scrolling	21	A. No, I can't recall.
24 for test failure. "1. Is the DAKO system faulty? This is unlikely as there are many 25 recall? Page 114 1 laboratories using the DAKO system successfully. The reason for test failure was 3 most likely due to a lack of test 4 optimization, including antigen retrieval 5 method and antibody detection system 6 titration, as positive controls showed weak 8 failed in all of the false negative cases. 9 Is the Ventana system too sensitive?" is 10 number two. "There is no evidence that the 11 Ventana system creates false positive results. 12 3. Is there a problem with tissue 13 fixation? There appears to be inadequate 4 attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no 17 standardized fixation protocol. 4. Inadequate 18 or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and 23 "7. better education required for 24 technologists, pathologists and clinicians 12 technologists, and clinicians 12 technologists, and clinicians 12 technologists, and then 6, which should be 5, 12 technologists, pathologists and clinicians 12 technologists, and then 6, which should be 5, 12 technologists, pathologists and clinicians 12 technologists, and clinicians 12 technologists, and then 6, which should be 5, 12 technologists, pathologists, and clinicians 12 technologists, and clinicians 12 technologists, and clinicians 12 technologists, and clinicians 13 technologists, is that something volumes at laborators and leader? 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 1 MS. HENNESSEY: 2 A. I think I would recall if some	22	down here, he has a number of headings, and	22	2 CHAYTOR, Q.C.:
Page 114 Page 114 Page 116 laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. J. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and 23 "7. better education required for technologists, pathologists and clinicians Page 116 Page 14 CHAYTOR, Q.C.: 2 A. I think I would recall if some of this detail as was shared with me. 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly admining reports. Were you ever given the sense that the external review reports as being fairly admining reports. Were you ever given the vertical of the laboratory and the work of the laboratory and the work of the laboratory and perhaps technologists? 2 MS. HENNESSEY: 2 A. I think I would recall if some of this detail as was shared with me. 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, the appropriate she being damining reports. Were you ever given the external review reports as being fairly admining reports. Were you ever given the external review reports as being fairly admining reports. Were you ever given the external review reports as being fairly admining reports. Were you ever given the external review reports as being fairly admining reports. Were you ever give	23	then he comes to conclusions about the reasons	23	Q. If you had been told the findings from the
Page 114 I laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. I share a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no ro no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for a laboratories using the DAKO system 1 MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.: 9 A. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly 8 damning reports. Were you ever given the 9 sense that the external reviews had been very critical of the laboratory and the work of the 10 critical of the laboratory and the work of the 11 pathologists and perhaps technologists? 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. 15 Hennessey, that you prepare, and it's prepared 16 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	24	for test failure. "1. Is the DAKO system	24	reports, is that something you think you would
laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. J. Is there a problem with tissue tattention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for test failure was a most likely due to a lack of test 3	25	faulty? This is unlikely as there are many	25	recall?
laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. J. Is there a problem with tissue tattention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for test failure was a most likely due to a lack of test 3		Page 114		
most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, ""inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians as was shared with me. 4 CHAYTOR, Q.C.: 5 Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being point she described the external review reports as being pairly shaming reports. Were you ever given the external review reports as being pairly for external review reports as being pairly external review reports as being pairly for external review reports as being pairly external review reports as being pairly for external review reports as being pairly external review reports as being pairly for external review reports as being pairly external review reports as being pairly for external review reports as being fairly for external review reports as being pairly for external review reports as being pairly for external review reports as being fairly for external review reports as being fairly for external review reports as being fairly for external review reports as being		1 agc 114		Page 116
optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality the and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for titration, as positive controls showed weak 6 Dr. Carter, at one point she described the external review reports as being fairly admining reports. Were you ever given the steanal review reports as being fairly external review reports as be	1	•	1	-
method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls method and antibody detection system titration, as positive controls showed weak Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the external review reports as being fairly damning reports. Were you ever given the external review reports as being fairly sense that the external review shad been very critical of the laboratory and the work of the 11 pathologists and perhaps technologists? 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. 16 and this is the briefing note then, Ms. 17 Hennessey, that you prepare, and it's prepared 18 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	l	laboratories using the DAKO system		MS. HENNESSEY:
titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians 16 Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the setternal review reports as being fairly damning reports. Nere you ever given the setternal review reports as being fairly damning reports. Nere you ever given the setternal review reports as being fairly damning reports. Nere you ever given the setternal review reports as being fairly damning reports. Nere you ever given the setternal review reports as being fairly damning reports. Nere you ever given the setternal review reports as being fairly damning reports. Nere you ever given the sense that the external review reports as being fairly damning reports. Nere you ever given the sense that the external review reports as being fairly damning reports. Passense that the external review report sense that the external review reports as being fairly damning reports. Sense that the external review had been very 10 critical of the laboratory and the work of the 11 pathologists and perhaps technologists? 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. N	2	laboratories using the DAKO system successfully. The reason for test failure was	2	MS. HENNESSEY: 2 A. I think I would recall if some of this detail
staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians restrictant review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very number two. "There is no evidence that the pathologists and perhaps technologists? A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. 16 and this is the briefing note then, Ms. 17 Hennessey, that you prepare, and it's prepared 18 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test	2 3	MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me.
failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. It is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians and the sense that the external reviews had been very sense that the external reviews had been very on the sense that the external reviews had been very to the sense that the external reviews had been very to the	2 3 4	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval	2 3 4	MS. HENNESSEY: 2 A. I think I would recall if some of this detail 3 was shared with me. 4 CHAYTOR, Q.C.:
Is the Ventana system too sensitive?" is number two. "There is no evidence that the ventana system creates false positive results. I Ventana system creates false positive results. I pathologists and perhaps technologists? I MS. HENNESSEY: I M	2 3 4 5	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system	2 3 4 5	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of
number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no rriched the laboratory and the work of the lip pathologists and perhaps technologists? A. I can't say I was given that sense. lip A. I can't say I was given that sense. lip Chaytor, Q.C.: lip Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. lip Hennessey, that you prepare, and it's prepared lip by yourself lip Ms. HENNESSEY: lip Ms	2 3 4 5 6	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak	2 3 4 5 6	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the
Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists and perhaps technologists? 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. 17 Hennessey, that you prepare, and it's prepared 18 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3 4 5 6 7	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls	2 3 4 5 6 7	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly
12 3. Is there a problem with tissue 13 fixation? There appears to be inadequate 14 attention paid by the grossing pathologists to 15 the thickness of the tissue slices, quality 16 and adequacy of fixation, and there is no 17 standardized fixation protocol. 4. Inadequate 18 or no attention is being paid by the reporting 19 pathologist to the status of internal 20 controls," and then 6, which should be 5, 21 "inappropriate choice of blocks with no 22 representative normal ductal epithelium," and 23 "7. better education required for 24 technologists, pathologists and clinicians 12 MS. HENNESSEY: 13 A. I can't say I was given that sense. 14 CHAYTOR, Q.C.: 15 Q. If we could look at, please, 0124, page eight, 16 and this is the briefing note then, Ms. 17 Hennessey, that you prepare, and it's prepared 18 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases.	2 3 4 5 6 7 8	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the
fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for the thickness of the tissue slices, quality the CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself you A. Yes. CHAYTOR, Q.C.: CHAYTOR, Q.C.: CHAYTOR, Q.C.: Q. And nobody approved it. CHAYTOR, Q.C.: A. Yes. CHAYTOR, Q.C.: CHAYTOR, Q.C.: CHAYTOR, Q.C.: A. Yes. CHAYTOR, Q.C.: CHAYTOR, Q.C	2 3 4 5 6 7 8 9	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is	2 3 4 5 6 7 8 9	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very
attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for the thickness of the tissue slices, quality 14. CHAYTOR, Q.C.: 15. Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself 19. MS. HENNESSEY: 20. A. Yes. 21. CHAYTOR, Q.C.: 22. Q. And nobody approved it. 23. MS. HENNESSEY: 24. A. No.	2 3 4 5 6 7 8 9	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the	2 3 4 5 6 7 8 9	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the
the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for the thickness of the tissue slices, quality and there is no and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8 9 10	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue	2 3 4 5 6 7 8 9 10	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists?
and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians 16 and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared 18 by yourself 19 Ms. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 Ms. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8 9 10 11 12	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue	2 3 4 5 6 7 8 9 10 11 12	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY:
standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians 17 Hennessey, that you prepare, and it's prepared by yourself 19 Ms. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 Ms. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8 9 10 11 12	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate	2 3 4 5 6 7 8 9 10 11 12 13	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense.
or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians 18 by yourself 19 MS. HENNESSEY: 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to	2 3 4 5 6 7 8 9 10 11 12 13 14	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.:
pathologist to the status of internal controls," and then 6, which should be 5, 20 A. Yes. "inappropriate choice of blocks with no representative normal ductal epithelium," and 27. better education required for 28 Ms. HENNESSEY: 24 technologists, pathologists and clinicians 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality	2 3 4 5 6 7 8 9 10 11 12 13 14 15	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight,
20 controls," and then 6, which should be 5, 21 "inappropriate choice of blocks with no 22 representative normal ductal epithelium," and 23 "7. better education required for 24 technologists, pathologists and clinicians 20 A. Yes. 21 CHAYTOR, Q.C.: 22 Q. And nobody approved it. 23 MS. HENNESSEY: 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms.
21 "inappropriate choice of blocks with no 22 representative normal ductal epithelium," and 23 "7. better education required for 24 technologists, pathologists and clinicians 26 CHAYTOR, Q.C.: 27 Q. And nobody approved it. 28 MS. HENNESSEY: 29 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared
representative normal ductal epithelium," and 22 Q. And nobody approved it. 23 "7. better education required for 23 MS. HENNESSEY: 24 technologists, pathologists and clinicians 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself
23 "7. better education required for 23 MS. HENNESSEY: 24 technologists, pathologists and clinicians 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5,	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself MS. HENNESSEY:
24 technologists, pathologists and clinicians 24 A. No.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself MS. HENNESSEY: A. Yes.
	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.:
25 about the pitfalls of IHC and the importance 25 CHAYTOR, Q.C.:	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And nobody approved it.
	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	laboratories using the DAKO system successfully. The reason for test failure was most likely due to a lack of test optimization, including antigen retrieval method and antibody detection system titration, as positive controls showed weak staining and general and internal controls failed in all of the false negative cases. Is the Ventana system too sensitive?" is number two. "There is no evidence that the Ventana system creates false positive results. 3. Is there a problem with tissue fixation? There appears to be inadequate attention paid by the grossing pathologists to the thickness of the tissue slices, quality and adequacy of fixation, and there is no standardized fixation protocol. 4. Inadequate or no attention is being paid by the reporting pathologist to the status of internal controls," and then 6, which should be 5, "inappropriate choice of blocks with no representative normal ductal epithelium," and "7. better education required for technologists, pathologists and clinicians	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	MS. HENNESSEY: A. I think I would recall if some of this detail was shared with me. CHAYTOR, Q.C.: Q. Ms. Hennessey, we know from correspondence of Dr. Carter, at one point she described the external review reports as being fairly damning reports. Were you ever given the sense that the external reviews had been very critical of the laboratory and the work of the pathologists and perhaps technologists? MS. HENNESSEY: A. I can't say I was given that sense. CHAYTOR, Q.C.: Q. If we could look at, please, 0124, page eight, and this is the briefing note then, Ms. Hennessey, that you prepare, and it's prepared by yourself MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And nobody approved it. MS. HENNESSEY: A. No.

Page 119

Page 120

Page 117

- Q. And it's November 7th, 2005. So that e-mail 1
- 2 exchange that I showed to you would have been
- November 3rd through 4th. 3
- 4 MS. HENNESSEY:
- A. Yes. 5
- 6 CHAYTOR, Q.C.:
- Q. When you were looking for the information for
- 8 your briefing note, and November 7th then, if
- you had your discussion on the Monday with Dr. 9
- Williams, I take it it would have been the day 10
- that you're preparing your note or the day 11
- your note is finalized. Is that correct? 12
- 13 MS. HENNESSEY:
- 14 A. Yes.

1

- 15 CHAYTOR, O.C.:
- Q. And you've written in this briefing note, 16
- after identifying the issue, the anticipated 17
- questions, "how did this happen? What is 18
- being done to correct this problem?" and then 19
- you come down under your second bullet, "the 20
- problem was discovered in May and a quality 21
- 22 review began immediately. Determining what
- happened with the testing of tissue samples is 23
- critical and a priority for Eastern Health and 24
- this government. The situation is disturbing 25
 - Page 118
 - for all of us." And then under suggested
- responses, "there are a number of steps in the 2
- testing process. Any problem in any step can 3
- 4
- 5 the problem is identified, changes in policies
- and practices may be necessary to minimize any 6
- recurrence of inconsistent test results." 7
- 8 Now Ms. Hennessey, is this the reference
- 9
- my question? 10
- 11 MS. HENNESSEY:
- suggested response, yes. 13
- 14 CHAYTOR, Q.C.:
- Q. Okay, "when the problem is identified"
- 16 MS. HENNESSEY:
- 17 A. Yes.
- 18 CHAYTOR, Q.C.:
- 19
- information you received from Dr. Williams? 20
- A. It tells--my sense of what it tells me is that 22
- Eastern Health was still trying to identify 23
- what caused the problem. 24
- 25 CHAYTOR, Q.C.:

- Q. And you are indicating that "determining what
- 2 happened is critical and a priority for the
- government and for Eastern Health"? 3
- 4 MS. HENNESSEY:
- A. Yes. 5
- 6 CHAYTOR, Q.C.:
 - Q. And you've included in the anticipated
- 8 question, "how did this happen?"
- 9 MS. HENNESSEY:
- 10 A. Yes.
- 11 CHAYTOR, Q.C.:
- 12 Q. And this briefing note again is intended for
 - the Minister to be able to answer questions in
- 14 the House of Assembly?
- 15 MS. HENNESSEY:
- A. Yes.

13

19

2

- 17 CHAYTOR, Q.C.:
- 18 Q. So whatever discussion you had with Dr.
 - Williams, you were left with the impression
- that the general findings of the external 20
- review did not help identify the problem? 21
- 22 MS. HENNESSEY:
- A. That's certainly my--by rereading this note 23
- now that I think that they were still trying 24
- to identify the problem and that they would be 25

- cause a problem with the test results. When
- that you were referring to in your answers to
- A. The one on the--the first one under the other 12

- Q. So what does that tell you, in terms of the
- 21 MS. HENNESSEY:

- introducing some changes in their practices 1
 - once the problem was confirmed.
- 3 CHAYTOR, Q.C.:
- Q. And whatever the findings were, because your 4
- 5 question had been very specific, "what are the
- general findings?" were you told the findings 6
- 7 from the external reviews?
- 8 MS. HENNESSEY:
- 9 A. I was not told the details that you just
- 10 showed me.
- 11 CHAYTOR, Q.C.:
- Q. But were you told anything?
- 13 MS. HENNESSEY:
- 14 A. I don't recall specifics around -
- 15 CHAYTOR, Q.C.:
 - Q. What do you recall?
- 17 MS. HENNESSEY:
- A. I don't--I have to say I don't recall, Ms. 18
- Chaytor, what the information that was 19
- provided to me by Dr. Williams that morning. 20
- 21 CHAYTOR, Q.C.:

- Q. So the best you can do in your evidence to the 22
- Commissioner is say that looking back now over 23
- the briefing note and what you put in the 24
 - briefing note, you were left with the

Page 123

Page 124

impression that the problem had yet to be 1

- 2 identified?
- 3 MS. HENNESSEY:
- A. Certainly based on that briefing note, I would
- certainly have had that impression at that 5
- time.
- 7 CHAYTOR, O.C.:
- 8 Q. So Ms. Hennessey, I want to understand if it's
- that you understood the reviews were complete?
- 10 MS. HENNESSEY:
- A. Yes. 11
- 12 CHAYTOR, Q.C.:
- Q. You did understand that?
- 14 MS. HENNESSEY:
- A. Yes. 15
- 16 CHAYTOR, Q.C.:
- Q. That the reports had been received? 17
- 18 MS. HENNESSEY:
- A. Yes.
- 20 CHAYTOR, Q.C.:
- 21 Q. That the general findings were available, but
- 22 that it had shed no light on the problem with
- 23 the ER/PR testing?
- 24 MS. HENNESSEY:
- 25 A. I don't know if I could say that. I know that
- the reports had been received. That they, you 1
- know, would have provided some information to 2
- Eastern Health based on this note. My sense 3
- is that the core problem had not been 4
- 5 identified at that time.
- 6 CHAYTOR, O.C.:

8

- Q. And that was based on the reviews? Your 7
 - question was what were the findings of the
- reviews. So if that question hadn't been 9
- answered, would you be continuing to ask that 10
- 11 question?
- 12 MS. HENNESSEY:
- A. With respect to what happened? 13
- 14 CHAYTOR, Q.C.:
- Q. Well, with respect to the general findings. 15
- If you hadn't been given the answer, would we 16
- 17 expect to see you asking that question again?
- 18 MS. HENNESSEY:
- A. Yeah, I think the--as we move further along 19
- that the--our notes identify some of the 20
- recommendations that came out of the review. 21
- But, no, I don't recall and I still don't have 22
- a clear understanding of what happened. 23
- 24 CHAYTOR, O.C.:
- Q. And other than that e-mail on November the 25

- 3rd, did you ever ask?
- 2 MS. HENNESSEY:
- A. Ms. Chaytor, I don't remember. 3
- 4 COMMISSIONER:
- Q. Ms. Hennessey, I'm wondering if you can 5
- perhaps approach it a slightly different way 6
- and give me some assistance on this because 7
- 8 what you have here is a situation where you've
- asked for the results of a report. 9
- 10 MS. HENNESSEY:
- A. Yes. 11
- 12 COMMISSIONER:
- Q. And on the basis--and you communicated with
- 14 Eastern Health.
- 15 MS. HENNESSEY:
- A. Yes.

19

- 17 COMMISSIONER:
- 18 Q. We have a reply back which indicates that just
 - that Dr. Williams will talk to you about the
- aspect which relates to the reports. 20
- 21 MS. HENNESSEY:
- 22 A. Yes.
- 23 COMMISSIONER:
 - Q. And you indicate you're fairly confident he
- would have done so, he's very good at doing 25
- Page 122
- that kind of thing? 1
- 2 MS. HENNESSEY:
- A. He's very good at returning my calls. 3
- 4 COMMISSIONER:
- 5 Q. Okay. All right. So, what I hear you saying
- is it's likely that Dr. Williams spoke to me, 6
- 7 and you can say this is what I put in my
- briefing note. As I understand it, you're 8
- also saying I don't remember the conversation, 9
- but on the basis of the briefing note this is 10
- 11 what I conclude?
- 12 MS. HENNESSEY:
- A. Yes. 13
- 14 COMMISSIONER:
- Q. But as Ms. Chaytor is rightfully pointing out 15
- to you, you had asked him a specific question, 16
- you'd asked him in terms of the reports which 17
- you had anticipated, based on prior 18
- communication, they would then have in their 19
- position? 20
- 21 MS. HENNESSEY:
- A. Yeah, I would anticipate that they have the 22
- reports. I didn't anticipate seeing the 23
- 24 reports.
- 25 COMMISSIONER:

May 27, 2008 Mult	i-Page [™] Inquiry on Hormone Receptor Testing
Page 125	Page 127
1 Q. Okay. But you did anticipate that they would	prepared at that time, that, I think, would
2 have them?	2 have been my understanding.
3 MS. HENNESSEY:	3 COMMISSIONER:
4 A. Yes.	4 Q. Now, there's another step in this. Did you
5 COMMISSIONER:	get that, which you may or may not be able to
6 Q. And you asked them, Eastern Health,	6 answer, but I think it's fairly important, is
7 essentially what were the key messages coming	7 that because Dr. Williams might have said to
8 out of those reports?	8 you, for example, there are all kinds of
9 MS. HENNESSEY:	9 things that can lead you to the same
10 A. Yes.	10 conclusions, for example, if somebody had said
11 COMMISSIONER:	to you, well, I don't know what's in the
12 Q. Then you write your briefing note?	report, but once the problem is identified,
13 MS. HENNESSEY:	we're going to take the steps to correct it.
14 A. Yes.	That's one way of interpreting this.
15 COMMISSIONER:	15 MS. HENNESSEY:
16 Q. In which you do not say what the key messages	16 A. I think Dr. Williams certainly would have
are coming out of the reports.	known what was in the reports.
18 MS. HENNESSEY:	18 COMMISSIONER:
19 A. No, I -	19 Q. Well, that's what I need to know, whether or
20 COMMISSIONER:	20 not you were being told anything which
21 Q. Is that fair?	21 indicated that either the content of the
22 MS. HENNESSEY:	
down through all of the details that you just shared with me in the report.	but I can assure you that as soon as we figure out what went wrong, we'll fix it? Or was he
	2,
Page 126	
1 COMMISSIONER:	saying we still don't know what's wrong, but
2 Q. So are you rememberingare you saying that he	when we figure it out, we're going to fix it?
didn't do that because you don't remember him	3 You see, there are all kinds of possibilities
4 having done it so or do you remember enough of	4 that can lead to the same thing coming in your
5 the conversation to know that he didn't do	5 briefing note.
6 that? You see, when you read your briefing	6 MS. HENNESSEY:
7 note.	7 A. Right.
8 MS. HENNESSEY:	8 COMMISSIONER:
9 A. Yes.	9 Q. And it's rather important to figure out what
10 COMMISSIONER:	happened in the middle. So if you're able to
Q. Then it looks like, on the face of it, that	assist us, we'd very much appreciate it.
the problem has not yet been identified, they	12 MS. HENNESSEY:
don't know what went wrong at Eastern Health.	13 A. Well, I seem to recall whenthe comment there
14 MS. HENNESSEY:	about there's a number of steps in the testing
15 A. That's right, by reading my briefing note,	process, there was a reference to that there
16 that's what -	being 40 steps in the testing process and that
17 COMMISSIONER:	anything could go wrong in these steps that
18 Q. Okay. And what I need to know is whether or	could, you know, cause a problem with the
not you got that from Dr. Williams' remarks to	testing. When I read on, I mean, I would have
20 you?	to read there that the problem had not been-
21 MS. HENNESSEY:	or my interpretation of what I was told was
A. I would think that's what I would have gotten,	22 that the problem still had not been clearly
but I don't recall specifically, Commissioner,	identified and that when it was, that they may
to be able to say that definitively. But	need to implement changes in their policies

and practices. I think that's what I would

25

that, you know, if that's the response that we

Multi-Page TM May 27, 2008 **Inquiry on Hormone Receptor Testing** Page 129 Page 131 have to conclude from what I've written there. 1 MS. HENNESSEY: 2 COMMISSIONER: A. I mean, we would--with respect to quality reviews done in the health authorities. I Q. Do you recall at any point anybody saying to 3 3 you I cannot tell you what's in the reports? mean, these would be internal to their 4 4 5 MS. HENNESSEY: 5 organizations. We would, I think, be made A. No, I do not recall anyone telling me that. aware of some of the general findings, but we 6 would not expect to see the reviews. 7 COMMISSIONER: 7 Q. Sorry, Ms. Chaytor, I've interrupted again. 8 CHAYTOR, Q.C.: 9 CHAYTOR, Q.C.: Q. Okay. My question being whether or not the Q. Thank you, Commissioner. In answering the 10 department ever asked for such information 10 Commissioner's questions, you indicated that from a health authority and were told they 11 11 12 you didn't anticipate seeing the reports. Why 12 could not have the information? not? 13 MS. HENNESSEY: 13 14 MS. HENNESSEY: 14 A. I don't recall asking specific question, you know, to give me a copy of the review. 15 A. I understood that these were quality reviews 15 16 that were done internal to that organization 16 CHAYTOR, Q.C.: and that they would take the reviews and Q. Okay. So I take it that you're not aware of 17 17 implement the recommendations. any situation where the department ever 18 18 19 CHAYTOR, O.C.: 19 requested information arising from a quality Q. And who gave you that understanding? review and were told by a health authority 20 20 they couldn't have the information? 21 MS. HENNESSEY: 21 22 A. With respect to the access to the quality 22 MS. HENNESSEY: reviews? A. I don't, I don't recall being told we couldn't 23 23 have some information around the general 24 CHAYTOR, Q.C.: 24 findings or recommendations in a review, but I 25 Q. Yes, that you wouldn't anticipate seeing them 25 Page 130 Page 132 because you understood they were quality don't recall ever asking specifically for the 1 1 reviews, who -2 report, reports of this nature to be sent to 2 the department. 3 MS. HENNESSEY: 3 A. That's right. 4 CHAYTOR, O.C.: 5 CHAYTOR, Q.C.: Q. Were you aware that both Minister Ottenheimer 5 Q. Where did you receive that? and Mr. Abbott expected to receive copies of 6 7 MS. HENNESSEY: 7 the reports? A. I mean, I understood that these types of 8 MS. HENNESSEY: 8 reviews are internal to an organization and A. I don't recall being in a discussion where 9 9 they are protected under the Evidence Act. they indicated to me that they were expecting 10 10 11 CHAYTOR, Q.C.: 11 to receive these reports. Q. Okay. And did you have that understanding 12 12 CHAYTOR, O.C.: prior to this issue of ER/PR? 13 Q. Did you ever share your view with them as to 13 the protection that you understood was 14 MS. HENNESSEY: 14 A. I think generally I knew that there was a 15 afforded the reports? 15 section in the Evidence Act related to quality 16 MS. HENNESSEY: 16 17 or peer reviews. 17 A. No, I don't recall a discussion around that 18 CHAYTOR, Q.C.: topic. 18 Q. Okay. And so you've had a fairly lengthy 19 19 CHAYTOR, Q.C.: career in the Department of Health and within Q. If we could look back then at your briefing 20 20 the health profession. Have you ever 21 note. There's just a couple of more points 21

22

23

24

25 MS. HENNESSEY:

here. Under "Background" and there's a number

of numbers again. And I take it these are the

numbers that you received from Ms. Predham?

wouldn't provide it?

encountered a situation where the department

requested information from a health authority

around a quality review and was told that they

22

23

24

- 11

- Q. And you tell her it's quite helpful. That e-15 mail ends, "However, without the information 16
- 17 on St. Pierre"?
- 18 MS. HENNESSEY:
- A. Yes. 19
- 20 CHAYTOR, O.C.:
- 21 Q. And if we could go then, please, back to P-
- 22 0098? This is the longer version a minute
- later from Ms. Predham. And this, of course, 23
- 24 includes the patients in care and the patients
- from St. Pierre? 25

- discussion with the deputy minister after that 14
- briefing. 15
- 16 CHAYTOR, Q.C.:
- 17 Q. What do you recall then being your next
- involvement on this issue? 18
- 19 MS. HENNESSEY:
- A. I'm just trying to think back. I believe
- following that briefing that Ms. Mundon was 21
 - asked to provide a list of questions to
- Eastern Health. 23
- 24 CHAYTOR, O.C.:

25 Q. Okay. And did you assist her in that?

1 MS. HENNESSEY:

- 2 A. Yes, I can remember her asking me to give her
- assistance with that because I felt I was
- 4 working at a bit of a disadvantage in that I
- 5 hadn't been in the briefing, but I did my best
- 6 to try and help her with a list of questions.
- 7 CHAYTOR, O.C.:
- 8 Q. And had Ms. Mundon been in the briefing?
- 9 MS. HENNESSEY:
- 10 A. I would think that she was, but I don't know
- 11 for sure.
- 12 CHAYTOR, Q.C.:
- 13 Q. Okay. And you found that you were in a bit of
- a disadvantage because you hadn't been in the
- briefing?
- 16 MS. HENNESSEY:
- 17 A. Well, I hadn't been in the briefing with
- Eastern Health and the minister, but I recall
- 19 giving her some assistance to draft some
- 20 questions to go back to Eastern Health.
- 21 CHAYTOR, Q.C.:
- 22 Q. Okay. And these were questions, I take it,
- 23 that the minister posed that he wanted
- 24 answered?
- 25 MS. HENNESSEY:

1 2

- Page 138
- A. Well, these would have been based on her
- knowledge, they would have been questions, I
- guess, as a follow up to the meeting, right.
- 4 CHAYTOR, Q.C.:
- 5 Q. And in having done your briefing note of
- November 7th, 2005, did anybody ask you any
- 7 questions surrounding the information in your
- 8 briefing note?
- 9 MS. HENNESSEY:
- 10 A. I don't remember anyone asking me any, for any
- additional information subsequent to that
- briefing note.
- 13 CHAYTOR, Q.C.:
- 14 Q. And did the minister or the deputy minister
- ever ask you anything further about the
- findings from the external review reports?
- 17 MS. HENNESSEY:
- 18 A. I don't recall being in a discussion with the
- deputy or the minister on it.
- 20 CHAYTOR, O.C.:
- 21 Q. Do you recall being asked anything about the
- findings from the external review reports by
- 23 anyone?
- 24 MS. HENNESSEY:
- 25 A. I don't recall. I mean, I provided the

information in the briefing notes. I don't

Page 139

- 2 recall a subsequent discussion in November or
- 3 December of 2005 on this topic.
- 4 CHAYTOR, Q.C.:
- 5 Q. Okay. If we could look at P-100, please? And
- 6 this is an e-mail exchange, then, between
- 7 yourself and Ms. Mundon?
- 8 MS. HENNESSEY:
- A. Yes.
- 10 CHAYTOR, Q.C.:
- 11 Q. And we start at the bottom. The bottom,
- actually, is between Ms. Mundon and Ms.
- 13 Thomas-Pennell.
- 14 MS. HENNESSEY:
- 15 A. Right.
- 16 CHAYTOR, Q.C.:

19

24

1

- 17 Q. Thanking them for the heads up regarding a
- media story. And then it's Friday, December
 - 2nd, sorry, 2005, Ms. Pennell to Ms. Mundon
- and the subject is "ER/PR." "I'll have to
- 21 check the latest numbers, but I think that's
- low. I'll find out for you." And what does
- an embedded message mean, do you know what
 - that means?
- 25 MS. HENNESSEY:

Page 140

- A. I think an embedded means it's just the
- 2 message is put in the e-mail rather than
- attached as a--to an e-mail.
- 4 CHAYTOR, Q.C.:
- 5 Q. Yes, okay. And because I'm just wondering in
- 6 terms of the dates here, there seems to be a
- 7 mix-up. We go from Ms. Pennell's, Thomas-
- 8 Pennell's e-mail to Tansy Mundon and it's
- 9 December, sorry, 2nd, 2005. Then we have your
- message--or, sorry, Tansy's message--I'm
- sorry. It's your message to Tansy.
- 12 MS. HENNESSEY:
- 13 A. Yes.
- 14 CHAYTOR, Q.C.:
- 15 Q. And copied to Mr. Rumboldt, and it's December
- 5th, 2005. And then Tansy's is December 4th,
- 2005. So it appears to be earlier. See what
- 18 I'm saying? You're writing to Tansy and then
- Tansy's response back is a day earlier. Can
- 20 you offer any explanation for that?
- 21 MS. HENNESSEY:

- 22 A. No, I can't. I can appreciate where you're
- coming from on it, but I don't think I would
- have been focused on that, I would have been
 - focused more on the information with respect

May 27, 2008 Mult	i-Page Inquiry on Hormone Receptor Testing
Page 141	Page 143
to the fact that only 25 percent of the test	1 April or May.
2 results were back at that time.	2 MS. HENNESSEY:
3 CHAYTOR, Q.C.:	3 A. Yes.
4 Q. Right, okay. So in terms of anyyou know,	4 CHAYTOR, Q.C.:
5 obviously she can't respond to your e-mail the	5 Q. Of 2005. And you're concerned that only 25
day before you even send it, so I'm just	6 percent of the test results are back. And so
7 curious about how that could be. And maybe	tell us about that, what do you recall around
8 there's some cutting and pasting going on here	8 this, and what, if anything, you did regarding
9 with the e-mails, I don't know.	9 this issue?
10 MS. HENNESSEY:	10 MS. HENNESSEY:
11 A. I don't know. I certainly wouldn't be cutting	11 A. At this particular point in time I was out of
and pasting because I don't have those skills.	the province when this e-mail exchange was
13 CHAYTOR, Q.C.:	happening. Actually on that Monday, the 5th,
14 Q. Okay. So "Hi Tansy," you're writing to, I	I was actually on paid leave. I was trying to
understand this is your original message,	ensure that thethat was a Monday morning. I
December 5th, 2005.	was trying to ensure that the most recent
17 MS. HENNESSEY:	information from Eastern Health would have
18 A. Yes.	been incorporated into the minister's briefing
19 CHAYTOR, Q.C.:	note at that time. I seem to remember vaguely
20 Q. "Hi Tansy, I'm also surprised that only about	a discussion with Mr. Abbott after I came
25 percent of the test results are back. This	back, but not any detail. I think at this
has been ongoing since this summer and I	point in time we were told that the testing
thought Mount Sinai was using extra staff	would be completed in January.
overtime to get these tests done as quickly as	24 CHAYTOR, Q.C.:
possible. From a patient's perspective this	25 Q. Okay. So how is it you recall that you were
Page 142	Page 144
is becoming less and less acceptable and it is	out of the province on this day?
2 likely the minister will be subject to some	2 MS. HENNESSEY:
a hard questioning on why things went wrong and	3 A. I recall that because on thein early
4 why it is taking so long to get the results	4 December of every year there's usually a
5 from Mount Sinai." And then you're asking	5 conference in Toronto that I like to attend
6 John Rumboldt, I understand that to be, he's	and then I often times have a good friend who
7 copied on this e-mail.	7 lives in Lancaster, Ontario, and I take an
8 MS. HENNESSEY:	8 extra day or two to spend with her before I
9 A. Right.	9 return to the province.
10 CHAYTOR, Q.C.:	10 CHAYTOR, Q.C.:
11 Q. "Can you please update the briefing note with	11 Q. And that fell around December 5th that year?
the test results data before the minister goes	12 MS. HENNESSEY:
to the house tomorrow? You may need to work	13 A. Yes, it did. And I also know because it
with Tansy on new questions/key messages.	happens to be the time period of my step-
Thanks." And Tansy's response, "This is one I	mother's birthday and I tend to be away more
think can definitely come up in the house this	than I'm in St. John's at that time.
week." So clearly at this point in time, Ms.	17 CHAYTOR, Q.C.:
Hennessey, you have concerns, it is now	18 Q. Okay. And so what in terms of you have
19 December?	19 concerns about the pace at which this
20 MS. HENNESSEY:	20 retesting is happening?
21 A. Right.	21 MS. HENNESSEY:
22 CHAYTOR, Q.C.:	22 A. Right.
Q. And the department was first notified of this	23 CHAYTOR, Q.C.:
in mid July. And the problem had been	Q. Did you follow up with Eastern Health on that
detected in Eastern Health back in the spring,	when you returned?

Page 145

1	MC	HENNECCEV.	

- A. I may have had a discussion with Dr. Williams
- at that time but I wouldn't be able to recall 3
- specifically. 4
- 5 CHAYTOR, Q.C.:
- Q. Was any assistance offered to Eastern Health, 6
- do you know, as to how this could be, this 7
- 8 could be handled in a more expeditious manner?
- 9 MS. HENNESSEY:
- A. Sorry, I missed the first part of your 10
- 11 question.
- 12 CHAYTOR, Q.C.:
- Q. Do you know was there any assistance offered 13
- to Eastern Health at this point in time, any 14
- inquiries made of them as to whether or not 15
- 16 the department could do anything to assist,
- and if so, any assistance offered to them? 17
- 18 MS. HENNESSEY:
- 19 A. Well, at this point in time Eastern Health
- would have been relying on Mount Sinai to 20
- provide--to do the retesting for them, so I 21
- 22 don't recall Eastern Health asking us for any
- 23 assistance at that time.
- 24 CHAYTOR, Q.C.:
- 25 Q. Okay. And the other question that it appears

Page 146

- that you haven't forgotten is "The minister 1
- 2 will be subject to some hard questioning on
- why things went wrong and why it is taking so 3
- long to get the results from Mount Sinai." So 4
- 5 I take it, Ms. Hennessey, this is the question
- you posed a month earlier? 6
- 7 MS. HENNESSEY:
- A. Yes. 8
- 9 CHAYTOR, Q.C.:
- Q. What happened. And you indicated at that 10
- 11 point in your briefing note that it was
- critical and a priority to the government and 12
- Eastern Health to determine what happened. 13
- And a month later you're indicating the 14
- 15 minister is probably going to be subject to
- some hard questioning on why things went 16
- 17 wrong.
- 18 MS. HENNESSEY:
- A. I was anticipating that, you know, time was 19
- passing on then from back in the summer of 20
- 2005 when the first indication would be three 21
- to four weeks and at this point in time we 22
- were into four months. 23
- 24 CHAYTOR, O.C.:
- Q. Yes. And that's regarding the--what's taking 25

- so long for the retesting?
- 2 MS. HENNESSEY:
- A. Yes.
- 4 CHAYTOR, Q.C.:
- 5 Q. I just want to focus for a second on the
- question that you posed a month earlier, what 6
- 7 went wrong.
- 8 MS. HENNESSEY:
- A. Yes.
- 10 CHAYTOR, Q.C.:
- Q. And you're anticipating that your minister is 11
- 12 going to be subject to some hard questioning
- on that issue, as well. 13
- 14 MS. HENNESSEY:
- A. Right. 15
- 16 CHAYTOR, Q.C.:
- Q. On what went wrong. You, yourself, identified 17
- 18 that as a significant issue.
- 19 MS. HENNESSEY:
- A. Yes. 20
- 21 CHAYTOR, Q.C.:
- 22 Q. A month earlier and had gone looking for
- answers. Based on what you've told us, you 23
 - didn't get the answer a month earlier, that it
- had not, certainly the question was still 25
- Page 148
- hanging. 1

24

- 2 MS. HENNESSEY:
- A. Yeah. 3
- 4 CHAYTOR, Q.C.:
- Q. Had not been determined. Did you now go back 5
- and make further inquiries of Dr. Williams or 6
- 7 anyone else at Eastern Health to get the
- answer as to what went wrong? 8
- 9 MS. HENNESSEY:
- A. I don't recall subsequent to this having a 10
- 11 further conversation with Dr. Williams on it.
- 12 CHAYTOR, O.C.:

14

- 13 Q. What did you understand that Eastern Health
 - was doing to further explore that answer, to
- 15 come up with the answer?
- 16 MS. HENNESSEY:
- 17 A. At that point in time I understood that
- Eastern Health had received the reports and 18
- that they were beginning to implement the 19
- recommendations in the reports and that the 20
- reviewers were coming back in the spring to do 21
 - a follow up.
- 23 CHAYTOR, Q.C.:
- 24 Q. But did the reports shed light on what had 25
 - gone wrong? Your briefing note had indicated

that the problem hadn't been identified as of

2 November 7th, 2005.

3 MS. HENNESSEY:

- A. Yes, that's correct. I don't know whether the
- problem was identified, the key problem, but I 5
- do know that they were in the process of 6
- implementing the recommendations from the 7
- reviewer's reports at that time. 8

9 CHAYTOR, Q.C.:

- Q. But I mean, whether it's a key problem or not 10
- or a multitude of problems or a multitude of 11
- factors, would we expect to see that? If you 12
- had that information, would we have expected 13
- you to provide that to the Minister so he 14
- could answer this hard question? 15

16 MS. HENNESSEY:

- A. Well I would have, if I had what caused the 17
- problem, I would have included it in the 18
- 19 briefing note.
- 20 CHAYTOR, Q.C.:
- Q. So you're still asking the question or, I 21
- don't see that you're asking it of anyone, but 22
- you're certainly seeing that the Minister is 23
- going to, in all likelihood be asked the 24
- 25 question.

1 MS. HENNESSEY:

- A. Yes, I would tend to think this had been in 2
- 3 the public for two months at that point in
- time, so I would think during that session of 4
- 5 the House of Assembly that the Minister would
- have been asked some questions on the file. I 6
- 7 don't think that that actually occurred.

8 CHAYTOR, O.C.:

- Q. And if the external reviews, based on your 9
- discussion with Dr. Williams, if the external 10
- 11 reviews didn't illuminate the answer to the
- question, what did you understand Dr. Williams 12
- and Eastern Health were doing to determine 13
- what went wrong? 14

15 MS. HENNESSEY:

- A. Ms. Chaytor, I don't know whether I had a 16
- 17 clear understanding other than that the
- recommendations from the reviewers were being 18
- implemented. 19
- 20 CHAYTOR, O.C.:
- 21 Q. And if they're going to implement
- recommendations from the reviews, what does 22
- that tell you that the reviews uncovered? 23
- 24 MS. HENNESSEY:
- A. I think the reviews would have uncovered, you

know, certain issues and that there would have

Page 151

Page 152

- 2 been a set of recommendations around these
- 3 issues and that Eastern Health had begun to
- implement the recommendations. 4
- 5 CHAYTOR, Q.C.:
- Q. What do you mean by "certain issues"?
- 7 MS. HENNESSEY:
- A. Pardon?
- 9 CHAYTOR, Q.C.:
- Q. What do you mean by "certain issues"?
- 11 MS. HENNESSEY:
- 12 A. I can't speak specifically, other than you
- just showing me the -13
- 14 CHAYTOR, Q.C.:
- Q. Well showing you what it is now and you're -15
- 16 MS. HENNESSEY:
- A. Yeah, the highlights. 17
- 18 CHAYTOR, Q.C.:
- Q. seeing that for the first time.
- 20 MS. HENNESSEY:
- A. Yeah, I mean, I would have relied on the 21
- 22 information that Eastern Health provided to us
- that there had been a number of 23
 - recommendations identified in the review
- reports and that they had begun the process of 25

Page 150

24

- implementing the recommendations, and that the 1
 - reviewers were coming back in the spring to
- 3 assess the progress.
- 4 CHAYTOR, Q.C.:
- 5 Q. And when were you told that, that there were a
- number of recommendations and they were being 6
- implemented? 7
- 8 MS. HENNESSEY:
- A. I would think I would have been told by Dr.
- Williams around that time. 10
- 11 CHAYTOR, O.C.:
- O. Around what time?
- 13 MS. HENNESSEY:
- A. I would think in this time period that we're 14
- currently talking about, I think in our 15
- subsequent briefing notes it makes reference 16
- to the recommendations being in the process of 17
- being implemented. 18
- 19 CHAYTOR, Q.C.:
- 20 Q. So in your November 7th briefing note, we
- 21 don't see that.
- 22 MS. HENNESSEY:
- A. No. 23
- 24 CHAYTOR, O.C.:
- Q. We see when the problem is identified, changes

				_
1	in policy	and practice	may be necessary	to

- 2 minimize the recurrence of inconsistent test
- 3 results.
- 4 MS. HENNESSEY:
- 5 A. Yes.
- 6 CHAYTOR, O.C.:
- Q. So I take it at that point in time you weren't
- 8 told that there were a number of, certain
- issues, as you say, a number of 9
- 10 recommendations and that they're being
- implemented. 11
- 12 MS. HENNESSEY:
- A. No, somewhere during that time period and I 13
- don't recall exactly, I'm sure Dr. Williams 14
- would have told me that there were a number of 15
- 16 recommendations that they were in the process
- of implementing. 17
- 18 CHAYTOR, Q.C.:
- 19 Q. What, Ms. Hennessey, did you tell the Minister
- on this time period, December 5th, a month 20
- later, 2005, what information did you give the 21
- 22 Minister to enable him to be able to answer
- 23 the hard line of questioning on why things
- went wrong? 24
- 25 MS. HENNESSEY:

- A. I think in the House of Assembly the Minister 1
- 2 would have put some key messages, I mean, we
- don't--the way our briefing notes for the 3
- House of Assembly are designed is that there's 4
- 5 a list of questions and then the information
- that's provided to the Minister is some key 6
- 7 messaging around these questions.
- 8 CHAYTOR, O.C.:
- Q. Now, Ms. Hennessey, what though then is your 9
- next briefing note? Because I think the next 10
- 11 briefing note that I have is February 23rd,
- 2006, is that correct? 12
- 13 MS. HENNESSEY:
- 14 A. Yeah. And the Minister would have been
- briefed by Eastern Health on November 17th. 15
- 16 CHAYTOR, O.C.:
- 17 Q. And there's no updating, you were going to update his briefing note after that brief, 18
- after that briefing. 19
- 20 MS. HENNESSEY:
- 21 A. Well there was a briefing note provided to the
- Minister on December 5th. 22
- 23 CHAYTOR, Q.C.:
- 24 Q. And so that would be arising out of the
- briefing note or the briefing of November 25

17th?

Page 153

- 2 MS. HENNESSEY:
 - A. That would have been the next briefing note

Page 155

Page 156

- following the November 17th meeting. 4
- 5 CHAYTOR, Q.C.:
- Q. So it's December 5th?
- 7 MS. HENNESSEY:
- A. Yes, I wasn't in the province at that time.
- That briefing note was done by John Rumboldt.
- 10 CHAYTOR, Q.C.:
- Q. Right, that's the one you asked Mr. Rumboldt 11
- 12 to attend to.
- 13 MS. HENNESSEY:
- 14 A. Yes.
- 15 CHAYTOR, Q.C.:
- Q. Okay.

19

2

- 17 THE COMMISSIONER:
- 18 Q. Ms. Hennessey, I'm a little confused here and
 - perhaps you can assist me, earlier in the
- morning when we were discussing the earlier 20
- briefing note, I got the view that because of 21
- 22 the inquiries made and what you put in the
- briefing note, you had concluded that Eastern 23
- Health could not figure out what the cause of 24
- the problem was and in effect they were 25
- assuring you that they were working on it and 1
 - as soon as they figured it out, they would
 - take the steps necessary? Now was I wrong 3
 - there? 4
 - 5 MS. HENNESSEY:
 - A. Yes, but at the same time they would have been 6
 - 7 begun to implement the recommendations from
 - 8 the review.
 - 9 THE COMMISSIONER:
 - Q. Well that's my point. In your mind are the 10
 - 11 recommendations being implemented as a result
 - of these, the work done by the two reviews, 12
 - separate and apart from the question of what 13
 - caused these changes in test results? I mean,
 - are these things going on at the same time or 15
 - are they interrelated at all? 16
 - 17 MS. HENNESSEY:
 - A. They were certainly implementing the 18
 - 19 recommendations from the reviewers' reports
 - and I understood, based on my briefing note, 20
 - that they were still trying to identify the 21
 - problem. 22
 - 23 THE COMMISSIONER:
 - 24 Q. Okay, so do I take it form what you're saying 25
 - that from your perspective, even when all of

			_	
1	these	recommendations were	completed,	that

- 2 wasn't going to tell you what the cause of the
- 3
- problem was? That was still a question yet to
- be answered. 4
- 5 MS. HENNESSEY:
- A. It was still a question that I didn't have an 6 answer to at that time. 7
- 8 THE COMMISSIONER:
- Q. Okay. So even if all of those recommendations 9
- were carried out, from your perspective, there 10
- still would have been this major question of 11
- 12 what caused the changes in test results which
- would still have had to have been answered at 13
- 14 some point?
- 15 MS. HENNESSEY:
- A. I think that is where I would have been with 16
- the file at that time. 17
- 18 THE COMMISSIONER:
- Q. Okay, thank you.
- 20 CHAYTOR, Q.C.:
- 21 Q. If we could look then, please, at 124, page
- 22 10? Okay, Ms. Hennessey, now this is, I'll
- take you to the second page of the document, 23
- this is the briefing note prepared by Mr. 24
- Rumboldt, December 5th, 2005, and I note 25
 - Page 158
- nobody has approved this briefing note, would 1
- that be usual? 2
- 3 MS. HENNESSEY:
- A. That briefing note would have been because I 4
- 5 was out of the province at that time, that
- briefing note would have gone directly from 6
- Mr. Rumboldt to Mr. Abbott. 7
- 8 CHAYTOR, O.C.:
- 9 Q. Yes, and if we compare these--so this would
- have went directly to Mr. Abbott, but it 10
- 11 wouldn't indicate on it that it was approved
- by Mr. Abbott? 12
- 13 MS. HENNESSEY:
- 14 A. Normal practice would show it as being
- approved by Mr. Abbott. 15
- 16 CHAYTOR, Q.C.:
- 17 Q. Okay, and this is a briefing note intended for
- the Minister's House of Assembly group? 18
- 19 MS. HENNESSEY:
- A. Our normal process is that the briefing notes 20
- would go to me and then on to the Deputy 21
- 22 Minister, so at this point in time, when I
- wasn't there, that the note would have gone 23
- 24 directly to the Deputy Minister.
- 25 CHAYTOR, Q.C.:

Q. And if we compare that to your briefing note

Page 159

Page 160

- of November 7th, approximately a month earlier 2
- 3

1

- 4 MS. HENNESSEY:
- 5 A. Right.
- 6 CHAYTOR, Q.C.:
 - Q. I think you will find that it's very similar,
- in terms of your anticipated questions and the 8
- second bullet being, "How did this happen? 9
- 10 What is being done to correct this problem?"
- 11 MS. HENNESSEY:
- A. Yeah. 12
- 13 CHAYTOR, O.C.:
- 14 Q. You see your same questions, "How did this
- happen? What is being done to correct this 15
- 16 problem?" And the same questions anticipated.
- 17 MS. HENNESSEY:
- A. Right.
- 19 CHAYTOR, Q.C.:
- Q. And if we scroll down to the bottom, "Other 20
- suggested responses", it's the same answer, 21
- 22 "There are a number of steps in the testing
- process, any problem in any step can cause a 23
- problem with the test results. When the 24
- problem is identified, changes in polices and 25

11

- practices may be necessary to minimize any 1
 - recurrence of inconsistent test results." And 2
 - I think if you have a careful look, which I'm 3
 - sure you have had occasion to do at this 4
 - briefing note, the main change would be around 5
 - the fact that they're taking longer than 6
 - 7 anticipated, in terms of the testing. The
 - second bullet here, "Testing is taking longer 8
 - than anticipated." So it doesn't appear at 9
 - this point in time then, the Minister is going 10
 - into the House with this briefing note and
 - there's nothing included on December 5th, 2005 12
 - to shed any further light on what happened? 13
 - 14 MS. HENNESSEY:
 - A. At that point in time there was no additional 15
 - information, other than as you say with 16
 - 17 respect to when they anticipated test results
 - to be back and I think there was some 18
 - additional information with respect to, in the
 - background with respect to the retesting 20
 - 21 results.
 - 22 CHAYTOR, O.C.:
 - Q. So when you are having the e-mail exchange 23
 - that you had on December 4th and 5th, 24 25
 - identifying that that would be a hard line of

1 questioning for the Mi	nister -
--------------------------	----------

- 2 MS. HENNESSEY:
- A. Right.
- 4 CHAYTOR, Q.C.:
- Q. Did you make any further inquiries to try and 5
- answer the anticipated question of what went 6
- 7 wrong?
- 8 MS. HENNESSEY:
- A. I do not remember making any additional inquiries of Eastern Health at that time. 10
- 11 CHAYTOR, Q.C.:
- Q. And why not? 12
- 13 MS. HENNESSEY:
- 14 A. I don't know if I can answer your question,
- 15 Ms. Chaytor.
- 16 CHAYTOR, Q.C.:
- Q. If we could have P-0125 then, please, page 3. 17
- 18 And this takes us then into 2006. Ms.
- 19 Hennessey, do you recall having any further
- involvement in this file after December 4th, 20
- 5th, in through up to February of 2006? 21
- 22 MS. HENNESSEY:
- 23 A. I don't recall, this is not a file that we
- 24 would have been engaged on on a weekly basis
- 25 with Eastern Health, I mean the department was

- comfortable at this point in time that Eastern 1
- Health was managing the file. 2
- 3 CHAYTOR, Q.C.:
- 4 Q. Well, Ms. Hennessey, were you comfortable that
- 5 the file was being managed in terms of the
- turn-around time? Your e-mail certainly of 6
- 7 December 4th and 5th indicates that an element
- 8 of disappointment that only 25 percent of the
- 9 results are back.
- 10 MS. HENNESSEY:
- 11 A. I mean, my understanding at that point in time
- 12 was that this was a work-load capacity issue
- at Mount Sinai, that Mount Sinai was 13
- 14 accommodating Eastern Health as quickly as
- 15 they could, that the time line, I think, would
- have been longer than either Eastern Health or 16
- 17 the department would have anticipated, but at
- 18 that point I wouldn't view it as being
- 19 something that was under our control.
- 20 CHAYTOR, O.C.:
- 21 Q. And you're anticipating that the testing was
- going to be completed in January of 2006? 22
- 23 MS. HENNESSEY:
- 24 A. Yes.
- 25 CHAYTOR, Q.C.:

Q. Was there any follow up with Eastern Health at

Page 163

Page 164

- 2 that time to find out whether or not it was
- now on schedule? 3
- 4 MS. HENNESSEY:
- 5 A. At that point in time my understanding was
- that the testing was still expected to be back 6
 - in January, the final test results.
- 8 CHAYTOR, Q.C.:
- Q. Do you recall if you had any discussions with 9
 - Eastern Health in January to follow up on
- that? 11

7

10

- 12 MS. HENNESSEY:
- A. I seem to recall something vaguely about that
- 14 there was some additional tests that had not
- been sent to Mount Sinai at that time that had 15
- 16 to be forwarded on.
- 17 CHAYTOR, Q.C.:
- 18 Q. So the ones, though, I take it that had gone
- 19 were back, is that right?
- 20 MS. HENNESSEY:
- 21 A. That was certainly my understanding, that they
- 22 were on a schedule, that they would be back by
- 23 the end of January.
- 24 CHAYTOR, Q.C.:
- 25 Q. And that you learned that there were

Page 162

- additional ones that had never been sent? 1
 - 2 MS. HENNESSEY:
 - A. Yeah, I think there was a small batch of tests 3
 - that had to be sent at that time? 4
 - 5 CHAYTOR, Q.C.:
 - Q. And who told you that? 6
 - 7 MS. HENNESSEY:
 - A. I would think that that information would have
 - either come to me from Dr. Williams or it 9
 - would have come through one of the staff that 10
 - 11 works with me.
 - 12 CHAYTOR, O.C.:
 - Q. And this is the next briefing note that I had 13
 - indicated that you're involved or your name
 - appears on and it's February 23rd, 2006. 15
 - 16 MS. HENNESSEY:
 - 17 A. Yes.

- 18 CHAYTOR, Q.C.:
- Q. And it's a fairly short note. You approved 19
- this note and it's prepared by Debbie Morris 20
- and at this point in time the anticipated 21
- questions, the question of how did this happen 22
- is no longer included in your anticipated 23
- 24 questions.
- 25 MS. HENNESSEY:

			8 1 7 1 1 1 1 1 1
	Page 165		Page 167
1	\mathcal{E}	1	CHAYTOR, Q.C.:
2	2 CHAYTOR, Q.C.:	2	Q. Mr. Abbott asked you to change the wording?
1	Q. Why is that?	3	MS. HENNESSEY:
4	4 MS. HENNESSEY:	4	A. Yeah, the wording that was there said the
5	A. I don't know why that question was removed at	5	recommendations are in the process of being or
1	that time.	6	had been implemented and it was struck out.
7	7 CHAYTOR, Q.C.:	7	CHAYTOR, Q.C.:
8	,	8	Q. And you specifically recall that?
9	down and we see a reference to "a quality	9	MS. HENNESSEY:
10	review began immediately when the problem was	10	A. Yes, I do, but I don't recall specifically
11	discovered. Eastern Health has had the method	11	whether it was this note, but I can assure you
12	of testing for ER/PR receptors reviewed by	12	that I would not have written a note saying
13	external consultants" and then we hear for the	13	that the recommendations were implemented
14	first time, inserted here, "their	14	until after the reviewers came back and
15	recommendations have been implemented and the	15	indicated that.
16	consultants are expected to return to Eastern	16	CHAYTOR, Q.C.:
17	Health in early April to review what has been	17	Q. And I want to be clear here, you have a
18	done. It is expected that Eastern Health will	18	specific recollection of having drafted a
19	begin testing of new patients at that time."	19	briefing note that said the recommendations
20	Where would this information have come from,	20	have been or are in the process of being
21	that the recommendations had been implemented?	21	implemented and Mr. Abbott crossing that off
22	2 MS. HENNESSEY:	22	and saying that the recommendations have been
23	A. The information would have come from Eastern	23	implemented?
24	Health, but I do want to make a comment here	24	MS. HENNESSEY:
25	that I would not have approved a note that	25	A. I do have a recollection, I can't speak to
	Page 166		Page 168
1	said that the recommendations have been	1	whether it was this note in particular, but I
2	implemented when the reviewerswhen I knew	2	do have a specific recollection of that and in
3	that they were in the process of being	3	reviewing all of my, of our briefing notes on
4	implemented and that the reviewers would be	4	this file, it appears that we're jumping back
5	coming back in April to assess the progress	5	and forth on whether they had been implemented
1 6	made towards the recommendations.	6	or were in the process of being implemented.
7	7 CHAYTOR, Q.C.:	7	CHAYTOR, Q.C.:
8	Q. Okay, so Ms. Hennessey, what are you telling	8	Q. And given that this briefing note on February
وا	us because it does say that you approved the	9	23rd, 2006 says exactly that, do you believe
10	note and that's what the note says.	10	this is the briefing note in question?
11	1 MS. HENNESSEY:	11	MS. HENNESSEY:
12	2 A. There are, I do recall that our note did say	12	A. Well this, in the next two of three briefing
13	and I can't say specifically it was this note,	13	notes, I think right up to May month, this
14	but it was during this time period that the	14	line is carried forward.
15	note didwhen it was drafted, said that the	15	CHAYTOR, Q.C.:
16	recommendations are in the process of being or	16	Q. That's correct. So you believe it started on
17	have been implemented.	17	February 23rd, 2006?
18	8 CHAYTOR, Q.C.:	18	MS. HENNESSEY:
19	Q. So how would this change? Why would we have a	19	A. I think it was during that time period, to
20		20	tell you exactly which note it was, Ms.
21	-	21	Chaytor, I don't recall, but I do recall a
22	to return?	22	specific note where it was written that the
23	3 MS. HENNESSEY:	23	recommendations are in the process of being
24	A. The Deputy Minister removed thator asked me	24	implemented or have been implemented and it
		1	

was taken out of the note.

to remove it.

8

10

1	CHAYTOR O.C.:	
	CHAYIUK U.C.:	

- 2 Q. And Mr. Abbott did that and you're saying you
- 3 wouldn't have approved this note as it is
- 4 worded here now?
- 5 MS. HENNESSEY:
- 6 A. No, I wouldn't, but as I think you may have
- 7 learned as we move through this process that
- 8 people's names are on briefing notes, that
- 9 briefing notes tend to be a collective effort
- of a number of people and that they happen to
- have, for the most part, my name on them with
- respect to approved by.
- 13 CHAYTOR, Q.C.:
- 14 Q. Now, Ms. Hennessey, so Mr. Abbott came back
- and if it's in relation to this briefing note
- or the others that follow which have the same
- or similar wording, and asked you to make that
- 18 change -
- 19 MS. HENNESSEY:
- 20 A. The note came back, I can still see it,
- 21 actually the note came back to me with the
- words crossed, like slashed through it.
- 23 CHAYTOR, Q.C.:
- 24 Q. I take it you don't still have it though?
- 25 MS. HENNESSEY:

Page 170

Page 172

- 1 A. No, I don't.
- 2 CHAYTOR, Q.C.:
- 3 Q. It doesn't still exist?
- 4 MS. HENNESSEY:
- 5 A. No.
- 6 CHAYTOR, Q.C.:
- 7 Q. So that change is made on the document?
- 8 MS. HENNESSEY:
- 9 A. Yes.
- 10 CHAYTOR, Q.C.:
- 11 Q. And what do you do? Do you just go ahead and
- make the change or do you have discussion with
- Mr. Abbott around that? Does he have
- knowledge you don't have? Did you have any
- discussion around that?
- 16 MS. HENNESSEY:
- 17 A. I don't recall a specific discussion. I do
- remember, you know, taking the words out of
- the note.
- 20 CHAYTOR, O.C.:
- 21 Q. And did you ask, well have they moved things
- 22 along because I understood the recommendations
- were still only in the process of being
- implemented, did you ask that question?
- 25 MS. HENNESSEY:

- 1 A. I don't recall a specific discussion on that
- 2 point.
- 3 CHAYTOR, Q.C.:
 - Q. And wouldn't you be curious to find out though

Page 171

- 5 that they've gone from being in process of
- 6 being implemented to now being implemented?
- 7 MS. HENNESSEY:
 - A. Yeah, I thought it was unusual to take the
- 9 reference out of the note when we knew that
 - the Eastern Health was in the process of
- implementing the recommendations, and Eastern
- Health wouldn't be aware, nor would the
- department be aware of the progress until the
- reviewers return in April.
- 15 CHAYTOR, Q.C.:
- 16 Q. If we could go on then to P-0125, page 8. And
- Ms. Hennessey on that last point, did you ever
- bring that issue to the attention of the
- 19 Minister?
- 20 MS. HENNESSEY:
- 21 A. No, I didn't.
- 22 CHAYTOR, Q.C.:
- 23 Q. You didn't?
- 24 MS. HENNESSEY:
- 25 A. No.
- 1 CHAYTOR, Q.C.:
 - Q. And why not?
 - 3 MS. HENNESSEY:
 - 4 A. Well I report to the Deputy Minister and I
 - 5 don't tend to go around the Deputy Minister.
 - 6 CHAYTOR, Q.C.:
 - 7 Q. Were you concerned with the accuracy of the
 - 8 information that was going in the Minister's
 - 9 briefing note?
 - 10 MS. HENNESSEY:
 - 11 A. No, I would have been concerned and in
 - hindsight, perhaps I should be brought it to
 - the attention of the Minister.
 - 14 CHAYTOR, Q.C.:
 - 15 Q. Because, Ms. Hennessey, whether it's accurate
 - or not, you are the person whose name is on
 - it, in terms of having approved the note.
 - 18 MS. HENNESSEY:
 - 19 A. Yes.

22

23

- 20 CHAYTOR, Q.C.:
- 21 Q. And if there were to be a problem, for example
 - if the Minister were to have stood up in the
 - House of Assembly and said all the
- recommendations have been implemented and he
 - was called on that -

Inquiry on Hormone Receptor Testing Page 175 1 CHAYTOR, O.C.: o. No. 3 THE COMMISSIONER: Q. It's our neighbour's alarm again, so -5 CHAYTOR, Q.C.: Q. Is it causing you problems, Ms. Hennessey? 7 MS. HENNESSEY: 8 A. No, I'm fine, thank you. 9 CHAYTOR, Q.C.: Q. I have to honestly say that I didn't even hear it. Page 8, this is the briefing note of 11 March 15th, 2006. 12 13 MS. HENNESSEY: 14 A. Okay. 15 CHAYTOR, Q.C.: Q. And this one now, Ms. Hennessey, is indicated again to be approved by you, prepared by 17 Debbie Morris? 18 19 MS. HENNESSEY: A. Yes. 20 21 CHAYTOR, Q.C.: Q. And it's March 15th, 2006? 23 THE COMMISSIONER: 24 Q. Ms. Hennessey, just on that point, just to be 25 double sure, so can I trust that anything on Page 176 the bottom of a briefing note, would the--for 1 example, would the name of the person who 2 prepared it, you've just told me in effect 3 that the person who is indicated as approving 4 things isn't necessarily always approving 5 things. Would the name of the person who is 6 7 indicated to have prepared it, necessarily always be accurate? 8 9 MS. HENNESSEY: A. Generally the name of the person who prepared 10 11 it is the name of the first drafter of the note, but there would have been, you know, 12 13 changes made in the note, the note goes to me, the note goes to our communications staff and 14 then onto the Deputy and to the Minister, so 15 there could be changes in the note at any 16 17 point, in either one of these steps and that the note, the final note would have gone back 18

to my branch and there is a shared directory 19 in the Board Services Division where people 20 can access the final note, but the note may 21 22 look different than from the first draft that was prepared by the person -23 24 THE COMMISSIONER: 25 Q. Okay, where it says "prepared by", that only

24

25

Q. Is that background noise causing a problem for

Multi-Page TM **Inquiry on Hormone Receptor Testing** Page 177 Page 179 means that that person prepared a first draft, Q. You reviewed the signed version. 1 2 which may or may not look like the final 2 MS. HENNESSEY: draft? A. Yes, there was one particular note when I 3 reviewed the signed version, there was a 4 MS. HENNESSEY: 4 A. That's correct. 5 change made and then the Minister signed the 5 version again. 6 THE COMMISSIONER: 6 Q. And the person who approved of it may or may 7 CHAYTOR, O.C.: 8 not have approved of it? Q. That wasn't about the ER/PR issue, was it? 9 MS. HENNESSEY: 9 MS. HENNESSEY: A. That's correct. And we don't, as you are A. No, it wasn't. 10 aware, I think Commissioner, that there has 11 11 CHAYTOR, Q.C.: been a change in that now the -Q. Okay. I was just going to take you then to 12 12 0125, page 8. And this is, as I've indicated 13 THE COMMISSIONER: 13 14 Q. The present protocol. 14 to you, is what we understand to be the next briefing note. 15 MS. HENNESSEY: 15 A. - present protocol has the Deputy's signature 16 MS. HENNESSEY: 16 and the Minister's signature on the note. It A. Right. 17 17 18 still doesn't have the ADM's--my name is still 18 CHAYTOR, Q.C.: 19 there as approved by, but it may not--I may Q. Now I would bring to your attention that there not have always approved that version of the is a briefing note included before that, see 20 20 here and it's dated March 9th, 2006, drafted 21 21 note. 22 CHAYTOR, O.C.: 22 by Beverly Griffiths, approved by you. But I understand that to be in error, is that right? 23 Q. So even under the new policy, notes can leave 23 the department with your name on it saying you 24 24 MS. HENNESSEY: approved it, but it may not be the version 25 A. Yes, that note is the March 9th, 2007 note. Page 178 Page 180 that you, in fact, approved? 1 CHAYTOR, Q.C.: 1 2 MS. HENNESSEY: Q. Right, yes, okay. So that for some reason, because it clearly talks about things that A. It may not be. 3 happened in December, 2006. 4 CHAYTOR, Q.C.: 4 Q. And that's what happened in February of this 5 MS. HENNESSEY: 5 A. Yes. 6 year? 6 7 MS. HENNESSEY: 7 CHAYTOR, Q.C.: A. And that's the culture on which we currently Q. So that it's clearly an error. So one -8 work and I guess, you know, we accept that 9 MS. HENNESSEY: 9 for--I don't particularly like it, but we 10 10 A. Yeah. certainly accept it. 11 CHAYTOR, Q.C.: 11 12 CHAYTOR, Q.C.: 12 Q. P-0125 at page 5 is not, in fact, March 9th, Q. Okay, Ms. Hennessey, I was -13 2006? 13 14 MS. HENNESSEY: 14 MS. HENNESSEY: A. The final notes would come back to me and in 15 A. Not that fact, now when the Deputy Minister and the 16 CHAYTOR, O.C.: 16 17 Minister signed the notes, the signed version 17 Q. And we do have a version of that note dated of the notes certainly come back to my office. March 9th, 2007. Yes. Do you know why this 18 18 briefing note would still be in the 19 CHAYTOR, Q.C.: 19 department's system and it's dated Q. And I take it that's how you were able to 20 20 determine that there was something in it not 21 21 incorrectly? correct in February 2008?

22 MS. HENNESSEY:

25 CHAYTOR, Q.C.:

9th, 2007 note.

23

24

A. No, I don't know. That's certainly a March

22

24

23 MS. HENNESSEY:

A. Yes.

25 CHAYTOR, Q.C.:

		_	0	1 ,
	Page 181			Page 183
1	Q. Yes, it clearly is.	1		the consultants, well, it says have returned,
2	MS. HENNESSEY:	2		but are expected, I guess, to return. Are you
3	A. Yeah.	3		able to explain why that would be worded in
4	CHAYTOR, Q.C.:	4		that way?
5	Q. And it is the same as the March 9th, 2007?	5	MS. H	ENNESSEY:
6	MS. HENNESSEY:	6	A.	No. All I can tell you is that that is an
7	A. Yeah.	7		error in the note.
8	CHAYTOR, Q.C.:	8	CHAY	TOR, Q.C.:
9	Q. Okay. And this is now 0125, page 8. And this	9	Q.	Okay. But in terms of it saying that the
10	is the briefing note that I just referred you	10		recommendations have been implemented, were
11	to, March 15th. So this is the next briefing	11		you comfortable yourself, is that your wording
12	note. Do you now have a new minister at this	12		in saying that?
13	point in time?	13	MS. H	ENNESSEY:
14	MS. HENNESSEY:	14	A.	No. At that point in time I understood that
15	A. Sorry, what's -	15		the Eastern Health was in the process of
16	CHAYTOR, Q.C.:	16		implementing the recommendations.
17	Q. March 15th -	17	CHAY	TOR, Q.C.:
18	MS. HENNESSEY:	18	Q.	Okay. So you knew that not to be accurate?
19	A if I could just see the date?	19	MS. H	ENNESSEY:
20	CHAYTOR, Q.C.:	20	A.	I knew that.
21	Q 2006. Mr	21	CHAY	TOR, Q.C.:
22	MS. HENNESSEY:	22	Q.	And the bullet before that says, "Testing of
23	A. Yes, that was around the time that there was a	23		the tissue samples sent to Mount Sinai, for
24	ministerial change.	24		the most part, has been completed and the vast
25	CHAYTOR, Q.C.:	25		majority of results are back and in various
-				
	Page 182			Page 184
	Page 182 O Okay And if we look back to that paragraph	1		Page 184 stages of review by a panel of physicians who
1 2	Q. Okay. And if we look back to that paragraph	1 2		stages of review by a panel of physicians who
2	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see	2		stages of review by a panel of physicians who will interpret the results." The use of the
2 3	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third	2 3		stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part".
2 3 4	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately	2 3 4	MS. H	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY:
2 3 4 5	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern	2 3 4 5	MS. H	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah.
2 3 4 5 6	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR	2 3 4 5 6	MS. H A. CHAY	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.:
2 3 4 5 6 7	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants.	2 3 4 5 6 7	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the
2 3 4 5 6 7 8	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented	2 3 4 5 6 7 8	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast
2 3 4 5 6 7 8 9	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health	2 3 4 5 6 7 8 9	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had
2 3 4 5 6 7 8 9	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress.	2 3 4 5 6 7 8 9	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be
2 3 4 5 6 7 8 9 10	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin	2 3 4 5 6 7 8 9 10	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March?
2 3 4 5 6 7 8 9 10 11 12	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports	2 3 4 5 6 7 8 9 10 11 12	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY:
2 3 4 5 6 7 8 9 10 11 12 13	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March	2 3 4 5 6 7 8 9 10 11 12 13	MS. H A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right.
2 3 4 5 6 7 8 9 10 11 12 13 14	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the	2 3 4 5 6 7 8 9 10 11 12 13 14	MS. H A. CHAY Q. MS. H A. CHAY	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.:
2 3 4 5 6 7 8 9 10 11 12 13 14 15	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the	2 3 4 5 6 7 8 9 10 11 12 13 14 15	MS. H A. CHAY A. CHAY Q.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY:
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I mean, that was March 15th note and the	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were back so I, I guess, tread cautiously there in
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I mean, that was March 15th note and the consultants didn't come back until April.	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were back so I, I guess, tread cautiously there in saying that for the most part the test results
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I mean, that was March 15th note and the consultants didn't come back until April. CHAYTOR, Q.C.:	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were back so I, I guess, tread cautiously there in saying that for the most part the test results were back. I did learn, at least as we moved
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I mean, that was March 15th note and the consultants didn't come back until April. CHAYTOR, Q.C.: Q. Yes. And so again, in terms of you approved	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	MS. H A. CHAY Q. MS. H A. CHAY Q. MS. H A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were back so I, I guess, tread cautiously there in saying that for the most part the test results were back. I did learn, at least as we moved through this process, that there was a small
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	Q. Okay. And if we look back to that paragraph that you took some issue with before, we see it here again under "Key messages" the third bullet, "A quality review began immediately when the problem was discovered. Eastern Health has had the method of testing ER/PR receptors reviewed by external consultants. Their recommendations have been implemented and the consultants returned to Eastern Health in early April for an assessment of progress. It is expected that Eastern Health will begin retesting once the final consultants' reports are reviewed." Now, this note is dated March 15th, 2006. And it's indicating that the recommendations have been implemented and the consultants have been back in early April. MS. HENNESSEY: A. I think that note should say that the consultants will return to Eastern Health. I mean, that was March 15th note and the consultants didn't come back until April. CHAYTOR, Q.C.:	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	MS. H A. CHAY Q. MS. H A. CHAY A.	stages of review by a panel of physicians who will interpret the results." The use of the phrase, "for the most part". ENNESSEY: Yeah. TOR, Q.C.: So "Testing of the tissue samples, for the most part, has been completed and the vast majority of results are back." You had understood that it was all going to be completed in January, it's now mid March? ENNESSEY: Right. TOR, Q.C.: Can you explain this wording? ENNESSEY: Yes, I can. I seem to recall that I was not real clear whether all the test results were back. I was certain that most of them were back so I, I guess, tread cautiously there in saying that for the most part the test results were back. I did learn, at least as we moved

Page 187 know--I mean, until the reviewers came back in 1 2 April we wouldn't know, you know, have their assessment as to whether all of the 3 recommendations had been implemented. 4 5 CHAYTOR, Q.C.: Q. Yes. Well, I guess if they had a list, 6 though, from the first time the reviewers were 7 in, they could have a list of recommendations 8 and have them all implemented. 10 MS. HENNESSEY: A. Yes. 11 12 CHAYTOR, Q.C.: Q. And just waiting for the reviewers to come in to make sure there was nothing else? 14 15 MS. HENNESSEY: A. Yeah. 17 CHAYTOR, Q.C.: Q. Or for the reviewers to satisfy themselves 19 that was, in fact, the case? 20 MS. HENNESSEY: A. I mean, we would have been in contact with 21 22 Eastern Health as we prepare these briefing notes for the House of Assembly, you know, 23 staff in the department would have been in 24 contact with Eastern Health. 25 Page 188 1 CHAYTOR, Q.C.: Q. Okay. And so that's what I'm saying to you, though, your understanding from your contact 3 with Eastern Health was that the 4 recommendations were not all implemented? 6 MS. HENNESSEY: A. That was my understanding at that time. 8 CHAYTOR, Q.C.: Q. And what stage did you understand the recommendations were in terms of 10 11 implementation? 12 MS. HENNESSEY: A. I just understood that they were in the 13 process of implementing the recommendations. 14 Whether it was 70 percent or 80 percent or 90 15 percent there at that point in time, I 16 17 wouldn't have had that level of discussion with Eastern Health. 18 19 CHAYTOR, Q.C.: Q. And whether that had advanced any from 20 February 23rd, you wouldn't know? Whether 21 22 there'd been any progress in the implementation of the recommendations, you 23

don't know? 25 MS. HENNESSEY:

Q. Okay. And who told you that, who said that

A. I would have understood, at that point in

time, that the recommendations were in the

process of being implemented and we wouldn't

24

they weren't all implemented?

20

21

23

24

25

22 MS. HENNESSEY:

A. I wouldn't have clearly known, but I would 1

- 2 have assumed as, you know, as time passed that
- Eastern Health would have been diligent in 3
- implementing the recommendations. 4
- 5 CHAYTOR, Q.C.:
- Q. And did you also then understand from Eastern 6
- Health that the testing of the samples sent to 7
- Mount Sinai had not been fully completed and 8
- that's why you added the wording "for the most 9
- 10 part"?

13

- 11 MS. HENNESSEY:
- A. I believe in March we had been told that the 12
 - final test results were back in February from
- Mount Sinai, but because there was a number of 14
- people at Eastern Health involved in the file 15
- 16 and a number of people in the department
- involved in the file, I tread cautiously at 17
- 18 that time.
- 19 CHAYTOR, O.C.:
- Q. So you were not prepared to accept that 20
- absolute from Eastern Health? 21
- 22 MS. HENNESSEY:
- 23 A. I guess I accepted what Eastern Health was
- telling me but I didn't want the minister to 24
- make a statement like that. 25

Page 192

- 1 CHAYTOR, Q.C.:
- Q. But the third bullet -
- 3 MS. HENNESSEY:
- A. I know, I know.
- 5 CHAYTOR, Q.C.:
- Q. The minister is going to make a statement 6
- saying -7
- 8 MS. HENNESSEY:
- A. I know, regrettably that was an error in judgment on my part. 10
- 11 CHAYTOR, Q.C.:
- Q. Were there other times that you, in the 12
- drafting or approval of briefing notes, that 13
- you were cautious not to state absolutes? 14
- 15 MS. HENNESSEY:
- A. I tend to be a cautious person in drafting 16
- notes because information for briefing notes 17
- comes from, you know, from a number of 18
- 19 sources. It may be for one note we'd be
- talking to one individual at Eastern Health 20
- and for another note we could be talking to a 21
- 22 different individual and depending upon who
- we're talking to, their understanding or their 23
- interpretation may be different, so I tend to 24
- be more cautious in wording of information 25

- that's provided to the minister.
- 2 CHAYTOR, Q.C.:

4

10

13

19

2

5

14

Page 189

- Q. So it's fair to say you had misgivings in the 3
 - information that you were receiving from
- Eastern Health partially due to the fact that 5
- you were dealing with a number of different 6
- individuals? 7
- 8 MS. HENNESSEY:
- A. Yeah. Yeah, I don't think I had--I'd go so 9
 - far as to say it was misgivings. I think
- people at Eastern Health did their best to 11
- assist us in the drafting of our briefing 12
 - notes, but because there was a number of
- players involved both at the department and at 14
- Eastern Health, I tended to err on the 15
- 16 cautious side.
- Q. Right. So, and I don't mean anything by the 18
 - word "misgivings" other than, and perhaps you
- prefer the word "uncertainty." 20
- 21 MS. HENNESSEY:

17 CHAYTOR, Q.C.:

- 22 A. Yeah.
- 23 CHAYTOR, Q.C.:
 - Q. That you had some nagging doubt in your mind
- or some uncertainty because of the number of 25
- Page 190
 - people you were receiving the information 1
 - from. Is that a fairer statement?
 - 3 MS. HENNESSEY:
 - A. That's probably a fairer statement. And this-4
 - -I mean, I think Eastern Health, you know, did
 - their best to assist us in this, that they 6
 - 7 were certainly working hard on the file, but
 - because there were so many people involved in 8
 - the file, that I wasn't 100 percent clear on 9
 - whether all the test results were back at that 10

 - 11 time.
 - 12 CHAYTOR, O.C.:
 - 13 Q. Okay. I just want to think about how cautious
 - you were in the wording on the issue and in
 - terms of stating absolutes in other briefing 15
 - notes and, of course, as we go further along 16
 - in the picture there are absolutes stated in 17
 - terms of notification to patients, for 18
 - 19 example.
 - 20 MS. HENNESSEY:
 - A. Right, yeah.
 - 22 CHAYTOR, Q.C.:
 - Q. And stating words to the effect that all 23
 - patients have been notified. 24
 - 25 MS. HENNESSEY:

	i-i age inquiry on from mone receptor resung
Page 193	Page 195
1 A. Yeah.	1 Q. Ms. Chaytor.
2 CHAYTOR, Q.C.:	2 CHAYTOR, Q.C.:
3 Q. Did you have the same reservations in stating	3 Q. Thank you. Good afternoon, Commissioner, and
4 that as an absolute?	4 good afternoon, Ms. Hennessey.
5 MS. HENNESSEY:	5 MS. HENNESSEY:
6 A. There were times when I wasn't real clear on	6 A. Good afternoon.
7 whether all the patients had been notified.	7 CHAYTOR, Q.C.:
8 CHAYTOR, Q.C.:	8 Q. Just before I got to the August 18th briefing
9 Q. And was that reflected in the briefing notes?	9 note, when we broke, we were looking at, we
10 MS. HENNESSEY:	had just finished looking at March 15th, 2006,
11 A. I'd have to have a look at the briefing notes.	which is found at P-0125, page 8. And, Ms.
12 CHAYTOR, Q.C.:	Hennessey, under "Key messages" we have looked
13 Q. Do you recall otherwise bringing that to the	at this bullet where it says, "A quality
14 attention of the minister of the day, that you	review began immediately when the problem was
had some uncertainty as to whether all	discovered. Eastern Health has had the method
patients have been notified?	of testing reviewed by external consultants.
17 MS. HENNESSEY:	Their recommendations have been implemented
18 A. With respect to at this point in time we would	and the consultants returned to Eastern Health
19 have had a new minister and I didn't do aI	in early April for an assessment of progress.
did a general briefing with the new minister,	20 It is expected that Eastern Health will begin
21 I didn't do a specific briefing with Minister	21 testing of new patients in St. John's once the
Osborne on this file.	final consultants' report has been received
23 CHAYTOR, Q.C.:	and reviewed, likely in late May." And then
Q. Okay. And what about then into Mr. Wiseman's	24 under "Other suggested responses." "Until the
25 time, do you recall bringing to Mr. Wiseman's	25 external consultants review the testing
Page 194	Page 196
attention that you had reservations as to	process and assure Eastern Health it is safe
whether or not all the patients had, in fact,	2 to proceed, the testing of new breast cancer
whether or not all the patients had, in fact, been notified?	to proceed, the testing of new breast cancer patients with ER/PR receptors will be done at
_	-
3 been notified?	patients with ER/PR receptors will be done at
3 been notified? 4 MS. HENNESSEY:	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I
3 been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning
3 been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to 6 the department, I was scheduled to do a	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner,
3 been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to 6 the department, I was scheduled to do a 7 briefing with him on my files on two if not	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or
3 been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to 6 the department, I was scheduled to do a 7 briefing with him on my files on two if not 8 three occasions and those briefings were	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.:	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports?
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.: 12 Q. Okay. And we'll get to that then.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY:
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.: 12 Q. Okay. And we'll get to that then. 13 MS. HENNESSEY:	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right.
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.: 12 Q. Okay. And we'll get to that then. 13 MS. HENNESSEY: 14 A. Yeah.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.:
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.: 12 Q. Okay. And we'll get to that then. 13 MS. HENNESSEY: 14 A. Yeah. 15 COMMISSIONER:	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Us that correct? And I'm just wondering then
been notified? 4 MS. HENNESSEY: 5 A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. 11 CHAYTOR, Q.C.: 12 Q. Okay. And we'll get to that then. 13 MS. HENNESSEY: 14 A. Yeah. 15 COMMISSIONER: 16 Q. Whenever you find a convenient spot, Ms.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant review the testing process and assure Eastern Health it's safe to proceed, the testing would
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break. CHAYTOR, Q.C.: Q. Okay. Well, actually, Commissioner, I'm about	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant review the testing process and assure Eastern
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break. CHAYTOR, Q.C.: Q. Okay. Well, actually, Commissioner, I'm about to go into the August 18th briefing note, so this may be a convenient time.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant review the testing process and assure Eastern Health it's safe to proceed, the testing would continue to be done at Mount Sinai and the fact that the testing of the new patients, or
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break. CHAYTOR, Q.C.: Q. Okay. Well, actually, Commissioner, I'm about to go into the August 18th briefing note, so this may be a convenient time.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant review the testing process and assure Eastern Health it's safe to proceed, the testing would continue to be done at Mount Sinai and the fact that the testing of the new patients, or new patients in St. John's will only be
been notified? MS. HENNESSEY: A. With respect to when Minister Wiseman came to the department, I was scheduled to do a briefing with him on my files on two if not three occasions and those briefings were cancelled by his office because of other commitments that he had. CHAYTOR, Q.C.: Q. Okay. And we'll get to that then. MS. HENNESSEY: A. Yeah. COMMISSIONER: Q. Whenever you find a convenient spot, Ms. Chaytor, we'll take the luncheon break. CHAYTOR, Q.C.: Q. Okay. Well, actually, Commissioner, I'm about to go into the August 18th briefing note, so this may be a convenient time.	patients with ER/PR receptors will be done at Mount Sinai." Now, Ms. Hennessey, I understood from the questioning this morning and follow-up questioning by the Commissioner, that you were of the impression or understanding, based on your discussion with Dr. Williams, that the answer to what went wrong with the testing wasn't contained in those external reviewers' reports? MS. HENNESSEY: A. Right. CHAYTOR, Q.C.: Q. Is that correct? And I'm just wondering then at this point in time had your impression changed? The fact that it's now being suggested that until the external consultant review the testing process and assure Eastern Health it's safe to proceed, the testing would continue to be done at Mount Sinai and the fact that the testing of the new patients, or

1

5

- 2 reviews, in fact, did reveal what may have
- 3 went wrong?
- 4 MS. HENNESSEY:
- 5 A. That certainly would be the impression based
- on the information in this note.
- 7 CHAYTOR, O.C.:
- 8 Q. Okay. So what happened in the meantime, what
- 9 discussions did you have to now have you form
- the impression that the external consultants'
- reports did reveal the problems?
- 12 MS. HENNESSEY:
- 13 A. I don't know whether I personally would have
- had discussions. It would have been, the note
- 15 would have been prepared by one of the staff
- that works with me, so it may have been some
- information that was provided to me at that
- time. I don't recall a specific discussion
- that I had with Dr. Williams on this point.
- 20 CHAYTOR, Q.C.:
- 21 Q. Did you -
- 22 MS. HENNESSEY:
- 23 A. But it certainly my impression then was that
- the Eastern Health felt confident that once
- 25 they implemented the recommendations in the--
 - Page 198
 - 1 John'

- from the external reviews that they felt confident at this point in time that they
- would be in a position to resume testing in
- 4 St. John's.
- 5 CHAYTOR, Q.C.:
- 6 Q. So now, Ms Hennessey, did you then go back and
- 7 look for the answer to the questions that you
- 8 posed earlier and the question that you
- 9 indicated earlier in a briefing note that was
- 10 crucial and of high priority to the
- government, did you then go back and say,
- well, what is now the answer to the question?
- 13 MS. HENNESSEY:
- 14 A. With respect to what happened?
- 15 CHAYTOR, Q.C.:
- 16 O. Yes.
- 17 MS. HENNESSEY:
- 18 A. I don't recall specifically asking that
- 19 question. I mean, we would have felt
- 20 confident at that point in time that Eastern
- 21 Health was managing it. I didn't not ask a
- specific question with respect to what
- happened.
- 24 CHAYTOR, Q.C.:
- 25 Q. Yes, and I'm not asking whether you asked a

- specific question. I'm wondering did you go
- 2 back and look for the information so that you
- 3 could give that answer to your minister?
- 4 MS. HENNESSEY:
 - A. I still don't know if I'm able to answer that
- 6 question what happened.
- 7 CHAYTOR, Q.C.:
- 8 Q. Did you ever go back looking for the answers
- 9 to that question?
- 10 MS. HENNESSEY:
- 11 A. I don't recall going back.
- 12 CHAYTOR, Q.C.:
- 13 Q. Okay.
- 14 MS. HENNESSEY:
- 15 A. To get a specific answer to that question.
- 16 CHAYTOR, Q.C.:
- 17 Q. Okay. With respect to any answer to the
- 18 question?
- 19 MS. HENNESSEY:
- 20 A. Right. I mean, I guess I can just go back to
- 21 my earlier point that we felt confident that
- Eastern Health was managing the file and that
- 23 they were implementing the recommendations,
 - that they would make a decision when it would
- be safe to proceed with testing again in St.
- Page 200
- 1 John's.
- 2 CHAYTOR, Q.C.:
- 3 Q. Yes, but, Ms. Hennessey, you, yourself, had
- 4 indicated this was a crucial issue for the
- 5 government.
- 6 MS. HENNESSEY:
- 7 A. Right.
- 8 CHAYTOR, Q.C.:
- 9 Q. And a high priority.
- 10 MS. HENNESSEY:
- 11 A. Right.
- 12 CHAYTOR, Q.C.:
- 13 Q. And that was said specifically in the context
- of what went wrong.
- 15 MS. HENNESSEY:
- 16 A. Yes.
- 17 CHAYTOR, Q.C.:
- 18 Q. So I'm wondering at this point in time when
- 19 you've come to the realization that the
- 20 external reviews must have shed light on the
- answer to that question.
- 22 MS. HENNESSEY:
- 23 A. Right.
- 24 CHAYTOR, Q.C.:
- 25 Q. Did you go back and look for the answer?

Page 204

1 MS. HENNESSEY:

- A. I did not go back to look--I do not recall 2
- 3 going back to look specifically for the answer
- 4 to that question.
- 5 CHAYTOR, Q.C.:
- Q. Okay. Do you know if anybody in the 6
- department did? 7
- 8 MS. HENNESSEY:
- 9 A. I don't know whether the deputy minister did
- at the time, I can't comment. 10
- 11 CHAYTOR, O.C.:
- 12 Q. Do you know whether anybody went back to look
- 13 for the answer?
- 14 MS. HENNESSEY:
- 15 A. I don't know whether anybody went back. I can
- only speak for myself that I did not go back. 16
- 17 CHAYTOR, Q.C.:
- Q. Or anyone that you have knowledge of you could 18
- 19 speak for, as well.
- 20 MS. HENNESSEY:
- 21 A. That's correct, yeah.
- 22 CHAYTOR, Q.C.:
- Q. So to your knowledge nobody in the department 23
- 24 went looking for the answer to the question?
- 25 MS. HENNESSEY:

1

Page 202

- A. I don't know of anybody in the department who
- went back looking for a specific answer to 2
- 3 that question.
- 4 CHAYTOR, Q.C.:
- Q. And why not? 5
- 6 MS. HENNESSEY:
- A. I guess I can just go back to the point that 7
- I've made, that, you know, we felt confident 8
- that Eastern Health was implementing the 9
- recommendation of these review reports and 10
- 11 taking whatever other action was necessary to
- ensure a comfort level that they could resume 12
- the testing in St. John's. 13
- 14 COMMISSIONER:
- 15 Q. Ms. Hennessey, do I take then that the
- department was not interested in knowing what 16
- 17 caused the testing problems?
- 18 MS. HENNESSEY:
- A. Commissioner, I don't recall any discussion 19
- around this point in time with respect to the 20
- 21 department wishing to go back and to get
- additional information from Eastern Health. 22
- 23 COMMISSIONER:
- O. Well, who makes these decisions? I mean, who 24 25
 - decides--I'm just trying to understand, I

- suppose, roles as much as anything here.
- 2 MS. HENNESSEY:
- A. Right. 3

7

9

10

16

- 4 COMMISSIONER:
- 5 O. And I understand that Eastern Health will
- obviously be charged with the operation, what 6
 - occurs within its own area. They had been
- 8 given, by legislation, the task of doing a
 - number of things and that included running the
 - particular laboratory which was involved in
- the testing. 11
- 12 MS. HENNESSEY:
- A. Yeah.
- 14 COMMISSIONER:
- O. So I think I understand what Eastern Health's 15
 - role is here. And maybe what I do not
- understand is the role of the department. 17
- 18 MS. HENNESSEY:
- A. Right. 19
- 20 COMMISSIONER:
- 21 Q. When something major occurs within a health
- 22 authority. I think I understood from what you
- 23 said and what some other witnesses have said
- that the department wishes to know when major 24
- 25 events occur.

1 MS. HENNESSEY:

- A. Right.
- 3 CHAYTOR, Q.C.:
- Q. So presumably Eastern Health has a 4
- responsibility to advise? 5
- 6 MS. HENNESSEY:
- A. Yes. 7
- 8 COMMISSIONER:
- 9 Q. Some witnesses have said, well, ultimately the
- minister is responsible. I presume in the 10
- 11 political sense they were saying that. So
- presumably the minister has to be advised. 12
- 13 MS. HENNESSEY:
- A. Yes. 14
- 15 COMMISSIONER:
- Q. Does the department in these situations have 16
- 17 no role except to prepare briefing notes for
- the minister? 18
- 19 MS. HENNESSEY:

23

- A. No, I mean, the briefing notes would be just 20
- one means that the minister would be briefed 21
- on a file. I mean, when these notes are done. 22
 - we would have done some discussions with the
- 24 minister. The minister nor the deputy
 - minister asked me to go back to ask Eastern

May 27, 2008	Multi-Pa	age Inquiry on Hormone Receptor Testing
Pa	ge 205	Page 207
1 Health what happened.	1	along in this file I do not recall in any
2 COMMISSIONER:	2	discussion with the minister or the deputy
3 Q. Pardon?	3	minister that I was personally asked to go
4 MS. HENNESSEY:	4	back to get any additional information. I
5 A. From my -	5	canyou know, I wish to assure you that if I
6 COMMISSIONER:	6	had been asked to do that, I certainly would
7 Q. The deputy minister -	7	have followed through.
8 MS. HENNESSEY:	8	COMMISSIONER:
9 A discussions with the deputy minister or the	9	Q. Okay. So on that occassion you did. Now, but
minister on this file, I don't recall being	10	your object in doing so was to advise your
asked to go back to do further follow-up wit	th 11	minister?
Eastern Health. I mean, the department felt	t 12	MS. HENNESSEY:
comfortable, to the best of my knowledge, the	hat 13	A. Yes.
Eastern Health was managing the file, that the	he 14	COMMISSIONER:
15 ER/PR testing was an operational matter for	15	Q. So that your minister was in position to
16 Eastern Health -	16	answer a question?
17 COMMISSIONER:	17	MS. HENNESSEY:
18 Q. So I'mI know that on one occassion you h	nad 18	A. Yeah.
the conversation, you went to look for	19	COMMISSIONER:
information, as I understood it, so you could	1 20	Q. You keep referring to the fact that the
21 properly brief the minister.	21	department was confident in Eastern Health.
22 MS. HENNESSEY:	22	MS. HENNESSEY:
23 A. Yes.	23	A. Yeah.
24 COMMISSIONER:	24	COMMISSIONER:
25 Q. As to what had occurred. And I understood	you 25	Q. Does that mean that what the Department of
Pa	ge 206	Page 208
1 to say this morning that you did that not	1	Health does in a major adverse event is
because someone directed you to do it, bu	t 2	determined by whether or not the Department of
because you felt that was part of your duty i	n 3	Health has confidence in the authority?
4 terms of gathering information to provide to	0 4	MS. HENNESSEY:
5 the minister?	5	A. I mean, we rely on the health authorities to
6 MS. HENNESSEY:	6	deliver the programs and services.
7 A. That's correct, yes.	7	COMMISSIONER:
8 COMMISSIONER:	8	Q. Um-hm.
9 Q. Okay. Now, can we be clear, at any time ale	ong 9	MS. HENNESSEY:
the way did either the minister or the deputy	7 10	A. In our discussions with, as we move through
ask you to contact Eastern Health or any	11	files, I mean, we would make an assessment on
particular person at Eastern Health regarding	g 12	whether the regional health authority was
the issue of what I will call what went wron	g, 13	taking appropriate actions. And at this point
the kind of information you were looking for	or 14	in time, I mean, we were comfortable with the-
when you did that e-mail a little earlier and	15	-with how Eastern Health was handling the
Dr. Williams called you back?	16	file.
17 MS. HENNESSEY:	17	COMMISSIONER:
18 A. In my subsequent discussions on this file, ye	ou 18	Q. But you do make an assessment, so part of the
know, with the minister and with the deput	ty 19	role of the department was to assess whether
20 minister, I was not asked to go back tothat	20	or not the authority is handling the matter
21 I can recall -	21	appropriately?
22 COMMISSIONER:	22	MS. HENNESSEY:
23 Q. Subsequent to your inquiry, you mean?	23	A. That would be correct. I mean, as we move
24 MS. HENNESSEY:	24	through this file, if at some point in the
25 A. That's right, subsequent to myas we mov	red 25	file that we weren't comfortable with how
		Page 205 Page 208

May 27, 2008 Mult	i-Page TM Inquiry on Hormone Receptor Testing
Page 209	Page 211
1 Eastern Health or another health authority was	1 A. Yeah. I guess one of thethe department has
2 handling a file, that we would certainly	three lines of business. One of them is
3 engage in further discussions with -	3 monitoring.
4 COMMISSIONER:	4 COMMISSIONER:
5 Q. Okay.	5 Q. Um-hm.
6 MS. HENNESSEY:	6 MS. HENNESSEY:
7 A the health authority.	7 A. And reporting. Wemy personal view was that
8 COMMISSIONER:	we do a reasonably good job on monitoring from
9 Q. All right, this isokay, let me tell you what	9 a financial perspective.
I hear you saying and you tell me whether I	10 COMMISSIONER:
got you right or not.	11 Q. Um-hm.
12 MS. HENNESSEY:	12 MS. HENNESSEY:
13 A. Okay.	13 A. If there's areas for improvement. With
14 COMMISSIONER:	respect to monitoring with respect to the
15 Q. What I hear you saying is that in the	services and programs, I think that's an area
relationship between health authorities and	16 that it certainly isit needs some
the Department of Health if there is a major	improvement.
event, the obligation of the health authority	18 COMMISSIONER:
is to advise the minister?	19 Q. Okay. So there is a role for monitoring how
20 MS. HENNESSEY:	20 authorities do what the authorities are
21 A. Yes.	21 supposed to do?
22 COMMISSIONER:	22 MS. HENNESSEY:
23 Q. The Department of Health, unless something	23 A. Yes, there is a role -
24 occurs in the process which causes the	24 COMMISSIONER:
Department of Health to question the way that	25 Q. As part of, I presume, accountability of
Page 210	
the authority is handling something.	1 authorities, really?
2 MS. HENNESSEY:	2 MS. HENNESSEY:
3 A. Yes.	3 A. Yes, it is. I mean, the department has three
4 COMMISSIONER:	4 key lines of business and one of which is
5 Q. The department itself does not interfere with	5 monitoring and reporting. My personal view is
6 what the authority does?	6 this, that the department does not do as a
7 MS. HENNESSEY:	really good job in that area of monitoring and
8 A. That's, yes, as we move through this file,	8 reporting.
9 when we were comfortable that Eastern Health	9 COMMISSIONER:
was managing the file, the department did not	10 Q. All right.
engage in further discussions.	11 MS. HENNESSEY:
12 COMMISSIONER:	12 A. If I just take it from my own perspective,
13 Q. Okay. And as I understood what you further,	there's many demands on the branch and on the
what you said, that there is a role for the	staff that work with me. There has been some
department assessing that. Does that just	new processes implemented within government
mean if something hits you in the face when	over the last two or three years, internal
they're communicating with you, you might look	processes, that take considerable amount of
at it differently or do you actually have a	time. There's also the annual budget process
process for saying, okay, how is the authority	is quite extensive. It starts in September
handling this and let's have a look at it?	20 and goes to April, May and there is
You know what I mean, it's a different thing.	21 considerable time spent internally on that.
One is an active thing, the other is waiting	There's also with respect to our internal
for something to happen to tell you it's not	processes I find that if the department had
being handled properly.	24 more flexibility within its total global funds
25 MG HENNEGGEN	25 to mode actor resources we would not be

to reallocate resources, we would not be

25 MS. HENNESSEY:

- having to spend as much time going back to 1
- 2 central government seeking authority. And all
- of these processes take away, I believe, from 3
- the time that we have to support the regional 4
- 5 health authorities.
- 6 COMMISSIONER:
- Q. Okay. And going back to this particular 7
- 8 event.
- 9 MS. HENNESSEY:
- A. Yeah. 10
- 11 COMMISSIONER:
- Q. As I understand what you have said was that 12
- because nothing struck you as being awry, at 13
- 14 least up to this point.
- 15 MS. HENNESSEY:
- A. Yes. 16
- 17 COMMISSIONER:
- 18 Q. With Eastern Health handling of the event, you
- 19 then were limited to being a conduit for
- information from Eastern Health to the 20
- 21 minister, is that correct?
- 22 MS. HENNESSEY:
- A. I think that's a fair assessment. 23
- 24 COMMISSIONER:
- 25 Q. All right. Sorry, Ms. Chaytor.
- Page 214

- 1 CHAYTOR, Q.C.:
- Q. No, thank you, that's helpful, Commissioner. 2
- Ms. Hennessey, when did you become aware that 3
- there was litigation commenced regarding this 4
- 5 matter?
- 6 MS. HENNESSEY:
- 7 A. It would have been sometime in the spring of
- 8 2006, if I recall correctly.
- CHAYTOR, Q.C.:
- Q. And there was a newspaper article regarding 10
- Michelle Hanlon's claim? 11
- 12 MS. HENNESSEY:
- A. Yes. 13
- 14 CHAYTOR, Q.C.:
- 15 Q. And that newspaper article was February 5th,
- 16 2006?
- 17 MS. HENNESSEY:
- A. Okay. 18
- 19 CHAYTOR, Q.C.:
- 20 Q. Would that be around the time you became aware
- 21 of this?
- 22 MS. HENNESSEY:
- 23 A. It could have been. I certainly would have
- 24 been aware sometime in the spring of 2006.
- 25 CHAYTOR, Q.C.:

Q. And do you recall me taking you through the

Page 215

Page 216

- 1 2 briefing notes this morning and pointing out
- that it's the February 23rd, 2006 briefing 3
 - note when the question is dropped what
- 5 happened, what went wrong?
- 6 MS. HENNESSEY:
- A. Right.

4

- 8 CHAYTOR, Q.C.:
- Q. That's dropped in February 23rd, 2006?
- 10 MS. HENNESSEY:
- A. Yes. 11
- 12 CHAYTOR, Q.C.:
- Q. And we don't see that afterwards in the 13
- 14 briefing note?
- 15 MS. HENNESSEY:
- A. No.

19

2

- 17 CHAYTOR, Q.C.:
- Q. Did knowledge of the fact that litigation had 18
 - been commenced influence you not continuing to
- seek the answer to the question of what 20
- happened? 21
- 22 MS. HENNESSEY:
- 23 A. No, that wouldn't have happened.
- 24 CHAYTOR, Q.C.:
- 25 Q. Was that discussed in the department?
- 1 MS. HENNESSEY:
 - A. No, that I can--my recall is there was no
 - discussion around Michelle Hanlon case in the 3
 - department. 4
 - 5 CHAYTOR, Q.C.:
 - Q. Yes, and not specific to that claim. My 6
 - 7 question is more general than that in terms of
 - whether or not the department having the 8
 - information as to what may have went wrong, 9
 - whether or not there was any concern about the 10
 - 11 department having that information and whether
 - or not then that information could be subject 12

 - 13 to further disclosure?
 - 14 MS. HENNESSEY:
 - A. No, there was no concern around that.
- 16 CHAYTOR, O.C.:
- 17 Q. No discussion about that?
- 18 MS. HENNESSEY:
- 19 A. There was no discussion on that in the
- 20 department that I was party to.
- 21 CHAYTOR, Q.C.:

- Q. And if the Department did have that 22
- information as to what happened or what went 23
- wrong, and if that were to show up in a 24
 - briefing note, would that information be

Multi-Page TM May 27, 2008 **Inquiry on Hormone Receptor Testing** Page 217 Page 219 subject to disclosure, for example, on an been implemented and the consultants--because 1 2 ATIPP request? 2 they're now back. They came in early April. 3 MS. HENNESSEY: 3 MS. HENNESSEY: A. I think all of our briefing notes would be A. Right. subject to disclosure under an ATIPP request. 5 5 CHAYTOR, Q.C.: But there was no discussion that I'm aware of Q. So are you now comfortable with that wording 6 happened in the Department around the law or are you again going by the wording that had 7 7 been suggested to you by Mr. Abbott? 8 suit. 8 9 CHAYTOR, Q.C.: 9 MS. HENNESSEY: Q. So no discussion whatsoever about the fact 10 A. I think at that point in time I still would 10 that litigation had been commenced? have had some concerns about the wording. 11 11 12 MS. HENNESSEY: 12 CHAYTOR, Q.C.: A. Not that I was party to. Q. And why is that? 14 CHAYTOR, Q.C.: 14 MS. HENNESSEY: Q. How did you become aware of the litigation? A. Because I think that the final report hadn't 15 15 16 MS. HENNESSEY: 16 been received from the consultants at that A. I think the information, when we were 17 time. 17 preparing the briefing note, that the 18 18 CHAYTOR, O.C.: information would have been provided from 19 19 Q. And then the next briefing note is May 2nd and it's approved by you, drafted by Debbie Eastern Health. 20 20 Morris, and on this one, again the question of 21 CHAYTOR, Q.C.: 21 what happened doesn't appear and we have a 22 Q. And I take it others in the Department would 22 have been aware of the existence of litigation similar--under key messages, similar bullet, 23 23 "a quality review began immediately" and it 24 24 goes on to talk about the external 25 MS. HENNESSEY: 25 Page 218 Page 220 A. Yes, with the information that was in the consultants, "their recommendations have been 1 1 2 briefing note, and I believe it was in the 2 implemented and the consultants returned in public at that time. early April to assess the progress. Eastern 3 3 Health expects to begin retesting" or "begin 4 CHAYTOR, O.C.: 4 Q. The next briefing note then is April 27th, 5 testing" sorry, "of the new patients once the 5 2006, and I believe that's 0125, page ten, and consultants final report has been received, 6 6 again, in terms of anticipated questions, we 7 7 likely in late May." don't see the question of what happened or 8 And then the next one is May 18th, and we 8 9 what went wrong, and we have the same bullet have some new questions here, under 9 here about the recommendations of the external anticipated questions, including "what has 10 10 been done to correct this problem? All the 11 consultants. 11 test results are back from Mount Sinai 12 MS. HENNESSEY: 12 Hospital in Toronto." So I take it you're A. Right. 13 13 feeling comfortable in saying that now, that 14 CHAYTOR, Q.C.: 14 all the test results are back. "These results Q. And it does say "have been implemented and the 15 15 consultants returned to Eastern Health in are in various stages of review by a panel of 16 16 early April to assess progress. Eastern physicians who will interpret the results. We 17 17 Health expects to begin testing new patients know this process is taking time, but our 18 18 19 once the consultants final report has been primary concern is that the patients' needs 19 received, likely in late May." And that are being addressed." And "Government is 20 20 briefing note is April 27th, 2006, and it's unable to comment at this time on the 21 21 statement of claim due to the legal 22 approved by yourself. 22 Now at this point in time, Ms. Morrissey proceedings," and I take it that's in

23

24

25

reference to the anticipated question, "what

is government's response to the claim brought

(sic.), did you have any problems with the

wording of saying their recommendations have

23

24

by the family of the late Ms. Hanlon."

- 2 And again, this briefing note is approved
- by yourself and is dated May 18th, 2006.
- by yourself and is dated way four, 200
- 4 There is reference again to the external
- 5 reviews, "the consultants recommendations have
- 6 been implemented. They returned in early
- 7 April this year to assess the progress.
- 8 Eastern Health expects to begin testing new
- 9 patients in St. John's once the final report
- has been received and reviewed, likely in late
- 11 May."
- 12 At this point in time then, you're still
- waiting for the final report? Is that it?
- 14 MS. HENNESSEY:
- 15 A. Yes.
- 16 CHAYTOR, Q.C.:
- 17 Q. You're still waiting for the final report from
- the consultants to -
- 19 MS. HENNESSEY:
- A. And based on our knowledge at that time, we would still be waiting for the final report.
- 22 CHAYTOR, Q.C.:
- 23 Q. And why do you now feel comfortable in saying
- 24 all the test results are back?
- 25 MS. HENNESSEY:

Page 222

- 1 A. At that point in time, Eastern Health advised
- 2 us that all the test results were back and we
- felt comfortable by then that all the test
- 4 results had come back from Mount Sinai.
- 5 CHAYTOR, Q.C.:
- 6 Q. And why do you say that "government is unable
- 7 to comment at this time on the statement of
- 8 claim due to the legal proceedings"?
- 9 MS. HENNESSEY:

11

- 10 A. I think it was just a general comment that
 - where this was a statement of claim between a
- family and Eastern Health, that the government
- would not become involved in it.
- 14 CHAYTOR, Q.C.:
- 15 Q. Ms. Hennessey, then at the end of May, did you
- follow up to find out whether or not the
- reports had in fact been received?
- 18 MS. HENNESSEY:
- 19 A. Final reports from -
- 20 CHAYTOR, O.C.:
- 21 Q. The external consultants.
- 22 MS. HENNESSEY:
- 23 A. the consultants? Yes, I understood shortly
- thereafter that the reports had been received.
- 25 CHAYTOR, Q.C.:

- 1 Q. So shortly after this briefing note of May
- 2 18th?
- 3 MS. HENNESSEY:
- A. It would have been sometime later, that's
- 5 right.

7

- 6 CHAYTOR, Q.C.:
 - Q. Okay, and what were you told the results of
- 8 those--the reports, what were you told about
- 9 that?
- 10 MS. HENNESSEY:
- 11 A. I don't recall specifically what I was told,
- other than the fact that the final reports
- were back from the consultants and I
- understood, rightly or wrongly, that it was
- okay to resume testing in St. John's.
- 16 CHAYTOR, Q.C.:
- 17 Q. And who told you that? Who was your source of
- information from Eastern Health?
- 19 MS. HENNESSEY:
- 20 A. I don't recall specifically who provided that
- 21 information at that time.
- 22 CHAYTOR, Q.C.:
- 23 Q. But that came from Eastern Health?
- 24 MS. HENNESSEY:
- 25 A. That's my understanding.

Page 224

Page 223

- 1 CHAYTOR, Q.C.:
 - Q. And I take it it would be one of your--one of
- 3 the two or three people that you normally
- 4 communicated with at Eastern Health?
- 5 MS. HENNESSEY:
- 6 A. That's right, and it may have come to me from
- one of my--one of the staff that works with
- 8 me, as I mentioned, as we moved through these
- 9 proceedings that I was not the direct contact
- on every issue at every minute on this file
- with Eastern Health.
- 12 CHAYTOR, Q.C.:
- 13 Q. So were you informed then that Ms.
- Wegrynowski, in fact, had a number of
- outstanding recommendations?
- 16 MS. HENNESSEY:
- 17 A. I don't recall being informed of that at that
- 18 time.

- 19 CHAYTOR, Q.C.:
- 20 Q. Was your understanding the reviewers had come
- back in and all the recommendations had been
 - implemented?
- 23 MS. HENNESSEY:
- A. In May of 2006, during the spring of 2006?
- 25 CHAYTOR, Q.C.:

May 2	7, 2008	Multi-	Page ²	Inquiry on Hormone Receptor Tes	ting
	Page	e 225		Page	227
1 Q	. Yes.		1	resume in St. John's.	
2 MS.	HENNESSEY:		2 CHA	AYTOR, Q.C.:	
3 A	. I think I understood then that Eastern Health		3 (Q. And did you understand then from that, if it's	
4	was implementingthey were certainly		4	okay for the testing to resume, that the	
5	continuing to implement the recommendations,		5	recommendations must be implemented?	
6	whether they were 100 percent implemented at		6 MS.	S. HENNESSEY:	
7	that time, I don't recall the specifics around		7 A	A. I don't know whether I would have gotten to	
8	it.		8	that level of detail in a discussion with	
9 CHA	YTOR, Q.C.:		9	Eastern Health on it at that time. I mean,	
	Okay, perhaps I misunderstood. I thought you	1	.0	the Department continued to feel confident at	
111	said that you had understood they were back in		1	that time that Eastern Health would resume the	e
12	and that the recommendations were implemented?	, 1	.2	testing when they felt that they had addressed	
13	That wasn't what you said?		.3	the recommendations and had put processes in	n
1	HENNESSEY:		4	place that would assure that the testing could	-
1	I'm sorry, maybe I'm just missing -		.5	be resumed safely in St. John's.	
	YTOR, Q.C.:			AYTOR, Q.C.:	
1	. I may have misunderstood.			Q. Yes, because that's what the key message and	1
1	HENNESSEY:		.8	the other suggested response for the past two	1
	Yeah, maybe I'm misunderstanding the question.		.9	or three briefing notes that I just referred	
	YTOR, Q.C.:			you to suggested, and until the external	
	-		20 21	consultants provide their final report and	
1	Okay. I had thought you had saidI asked				
22	whether you followed up and whether or not the		22	assure Eastern Health it is safe to proceed,	
23	reports were back.		23	the testing of new breast cancer patients with	
1	HENNESSEY:		24	ER/PR receptors will continue at Mount Sinai.	
25 A	Yes.		25 MS.	S. HENNESSEY:	
	-	e 226		Page	228
1	AYTOR, Q.C.:			A. Yeah.	
2 C	. I had thought you said that yes, they had been	1	2 CHA	AYTOR, Q.C.:	
3	back and the reports received and the		3 (Q. And in answering the question about the	
4	recommendations were implemented. But yo	u're	4	consultants recommendations having been	
5	saying they were still in the progress of		5	implemented, you're saying that you weren't	
6	being -		6	saying that because you were waiting for the	
7 MS.	HENNESSEY:		7	final report to come in?	
8 A	Yeah, I can'tI don'tI can't say for		8 MS.	S. HENNESSEY:	
9	certainly that it wasthat the report was 100		9 A	A. Ms. Chaytor, I have to apologize at the	
10	percent implemented at that time.	1	.0	moment, because I'm losing -	
11 CHA	YTOR, Q.C.:	1	1 CHA	AYTOR, Q.C.:	
12 Ç	But you weren't told that there were a number	r 1	2 (Q. That's fine. I don't mean to confuse you.	
13	of outstanding recommendations outlined in M	Ms. 1	3 MS.	S. HENNESSEY:	
14	Wegrynowski's report?	1	.4 A	A. Yeah, I'm losing the context around this now,	
15 MS.	HENNESSEY:	1	.5	and I don't want to -	
16 A	No, I wasn't. That detail wasn't shared with	1	6 CHA	AYTOR, Q.C.:	
17	me.			Q. I'm just wondering what you understood. Yo	u
1	AYTOR, Q.C.:		.8	were waiting foryou weren't comfortable	
1	. But you did understand that it was okay for		.9	particularly with the wording about the	
20	testing to resume?		20	consultants recommendations having been	
1	HENNESSEY:		21	implemented. You've told us about that, and	
1		1			

23

24

was received.

25 MS. HENNESSEY:

that you were waiting until the consultants

came back in and then until the final report

A. I understood that at that time, that the

testing would resume. I know it didn't resume

understanding then was that the testing could

until February 2007, but I sensed--my

22

23 24

best to move the information on the test

25

Cabinet Secretariat was looking for some

Page 233

- results from a document that Heather Predham
- 2 prepared. I summarized that information into
- a table. I provided the table to Cabinet
- 4 Secretariat, to Marilyn McCormack, and the
- 5 table was incorporated into a briefing note
- 6 that was drafted at Cabinet Secretariat.
- 7 CHAYTOR, Q.C.:
- 8 Q. Would Heather Predham have ever received a
- 9 copy of this note?
- 10 MS. HENNESSEY:
- 11 A. I didn't show the note to Heather Predham.
- 12 CHAYTOR, Q.C.:
- 13 Q. And to your knowledge, did she ever receive a
- 14 copy?
- 15 MS. HENNESSEY:
- 16 A. I don't--to the best of my knowledge, Heather
- would not have seen this note.
- 18 CHAYTOR, O.C.:
- 19 Q. If we could look then at 1477, please, page
- 20 two, and this is--I'll show you the first
- 21 page. I take it you're familiar with this
- correspondence, Ms. Hennessey. It's a letter
- from your solicitor, Mr. Pritchard, the
- 24 government's solicitor, May 23rd 2008, to
- 25 myself and Mr. Coffey.
- Page 234
- 1 MS. HENNESSEY:
- 2 A. Yes.
- 3 CHAYTOR, Q.C.:
- Q. You've seen this, I take it, and I just want
- 5 to--you indicate here that Marilyn McCormack--
- 6 "in relation to the 18th of August 2006
- briefing note, she states" so this would be
- 8 yourself, you're stating you were on vacation,
- 9 as you've told us, and returned to work on
- 10 August 7th.
- 11 MS. HENNESSEY:
- 12 A. Yes.
- 13 CHAYTOR, Q.C.:
- 14 Q. "Marilyn McCormack contacted me shortly after
- 15 I returned to work about a briefing note and
- asked me for the ER/PR retesting results. I
- advised Marilyn that I did not have the
- retesting results. She called me back and
- asked me to get the retesting results from
- 20 Eastern Health."
- Now I understood from what you told us a
- few minutes ago that this matter had been in
- the news, and is that what precipitated
- 24 Cabinet Secretariat looking for this
- 25 information?

- 1 MS. HENNESSEY:
- A. I would think so, but I really don't know for
- 3 sure. When the contact was made with me,
 - Marilyn indicated that, you know, a briefing
- 5 note was being done.
- 6 CHAYTOR, Q.C.:

4

7

13

24

1

2

- Q. Ms. Hennessey, why is it that the Department
- 8 hadn't looked for the retesting results prior
- 9 to Cabinet Secretariat asking that that
- 10 happen?
- 11 MS. HENNESSEY:
- 12 A. I don't know the answer to that question. The
 - department didn't ask for the test results on
- the patients until Cabinet Secretariat had
- asked us to get the test results.
- 16 CHAYTOR, Q.C.:
- 17 Q. And if we could look at P-1417 please? And
- Ms. Hennessey, this is an e-mail from Heather
- 19 Predham to yourself?
- 20 MS. HENNESSEY:
- 21 A. Yes.
- 22 CHAYTOR, Q.C.:
- 23 Q. And she copies Ms. Pilgrim and Ms. Elliott.
 - It's dated August 11th, 2006 and she's saying,
- 25 "Hi Moira, please find a briefing note as
- ge 234
 - attached. I've left a draft as Dr. Williams and Dr. Denic have not seen it as yet. If you
 - 3 have any questions, please do not hesitate to
 - 4 call."
 - 5 MS. HENNESSEY:
 - 6 A. Right.
 - 7 CHAYTOR, Q.C.:
 - Q. And then this is the information that is
 - 9 provided to you by Ms. Predham.
 - 10 MS. HENNESSEY:
 - 11 A. Right.
 - 12 CHAYTOR, Q.C.:
 - Q. Is this the table that you're referring to?
 - 14 MS. HENNESSEY:
 - 15 A. Yes, I would have used this information to
 - prepare the table that went into the August
 - 17 18th note.
 - 18 CHAYTOR, Q.C.:
 - 19 Q. Okay. So this is what was provided to you by
 - 20 Ms. Predham?
 - 21 MS. HENNESSEY:
 - 22 A. Yes.

- 23 CHAYTOR, Q.C.:
- 24 Q. And if we could look then please at P-0817?
 - And this is your e-mail correspondence then to

May 27, 2008 Mul	ti-Page TM Inquiry on Hormone Receptor Testing
Page 237	Page 239
1 Ms. McCormack.	1 CHAYTOR, Q.C.:
2 MS. HENNESSEY:	2 Q. Where did you receive the number of 923?
3 A. Yes.	3 MS. HENNESSEY:
4 CHAYTOR, Q.C.:	4 A. The number 923 came from one of our previous
5 Q. And you've indicated August 11th, again 2006.	5 briefing notes.
6 "I've just received the information from	6 CHAYTOR, Q.C.:
Eastern. It's in draft as their senior staff	7 Q. I'm sorry? So the last -
are not available to review it until Monday."	8 MS. HENNESSEY:
And you say you'll review it on the weekend	9 A. The number 923 came from a briefing note that
and you can conclude it on Monday. And then	10 we did in May, 2006.
this document is what you forward to Ms.	11 CHAYTOR, Q.C.:
12 McCormack?	12 Q. Okay, and this is August, 2006.
13 MS. HENNESSEY:	13 MS. HENNESSEY:
14 A. Yes.	14 A. 2006, yes.
15 CHAYTOR, Q.C.:	15 CHAYTOR, Q.C.:
Q. And that's what you've said is a summary of	Q. So the Maythe last briefing note you had
what Ms. Predham forwarded to you?	done prior to that was May 18th, 2006?
18 MS. HENNESSEY:	18 MS. HENNESSEY:
19 A. I did my best to take the information that Ms.	19 A. Let's have a look.
20 Predham forwarded to me and to put it into a	20 CHAYTOR, Q.C.:
table that was provided to Cabinet	21 Q. So that number would have appeared at some
22 Secretariat.	22 point prior to?
23 CHAYTOR, Q.C.:	23 MS. HENNESSEY:
24 Q. Okay, and why did you summarize her	24 A. Yes, the number is in the May 2nd, 2006
information? Why not just pass along to Ms.	25 briefing note.
Page 238	-
1 McCormack all of the information that Ms.	1 CHAYTOR, Q.C.:
2 Predham sent to you?	2 Q. Briefing note. Okay, we're at P-0125, page
3 MS. HENNESSEY:	3 13. And here we see Eastern Health has sent a
4 A. It's not a normal practice for us to take	total of 939, test results have been received
5 notes from our regional health authorities and	5 on 923 patients.
	6 MS. HENNESSEY:
7 normal practice is for a note to be prepared.	7 A. Yes.
8 CHAYTOR, Q.C.:	8 CHAYTOR, Q.C.:
9 Q. And if we look at this, you're indicating the	9 Q. Did you have any discussion with Ms. Predham,
total number of patient tissues sent for	10 it's now three months later?
11 retesting at Mount Sinai was 939.	11 MS. HENNESSEY:
12 MS. HENNESSEY:	12 A. Yes.
13 A. Yes.	13 CHAYTOR, Q.C.:
14 CHAYTOR, Q.C.:	Q. Did you discuss with Ms. Predham as to whether
15 Q. And the majority of the test results, 923,	or not the number still is 923?
have been returned. If we could go back,	16 MS. HENNESSEY:
please, to P-1447, page two?	17 A. I didn't have any discussion with Ms. Predham
18 MS. HENNESSEY:	on that. When I received this information

20

21

22

23

24

25

19 A. Right.

20 CHAYTOR, Q.C.:

21 Q. And Ms. Predham has written, "Based on this

information, the total number of patients that

23 were sent for retesting was 939."

24 MS. HENNESSEY:

A. Yes. 25

22

from Ms. Predham, it was on a Friday

correctly it was on a Sunday morning and then

the information was typed for me on Monday. I

didn't get a chance to review it until Monday,

working on a major presentation for Cabinet

the 14th, late in the day because I was

afternoon, I prepared the table, if I recall

					_
1	with respect	to our	Corner Brook	long-term	

- 2 care project at the time and the information
- 3 was forwarded to Ms. McCormack by one of our
- administrative assistants on the morning of 4
- 5 the 15th of August because I was travelling
- with the Minister to Labrador at that time. 6

7 CHAYTOR, O.C.:

- 8 Q. So you assume that between May and August
- there was no change in the number of results 9
- 10 received?
- 11 MS. HENNESSEY:
- A. I did not have a follow up discussion with Ms. 12
- 13 Predham at that time.
- 14 CHAYTOR, Q.C.:
- Q. And you used the number from May 2nd. 15
- 16 MS. HENNESSEY:
- 17 A. Yes.
- 18 CHAYTOR, O.C.:
- Q. If we could go then to P-1447, please, page 4? 19
- 20 And Ms. Predham--this is the 4th page of Ms.
- 21 Predham's information that she provided to
- 22 you.
- 23 MS. HENNESSEY:
- 24 A. Right.

1

25 CHAYTOR, Q.C.:

Page 242

- Q. And under "Patients who are deceased" she puts
- 2 in brackets (176). "(176) patients are
- identified as being deceased, either through 3
- chart review or direct contact with a family 4
- 5 member. Of these 171, 101 were retested and
- results received. The remaining 65 will not 6
- 7 be retested unless we are approached by the
- 8 families. In June an ethics review was
- conducted regarding notification to the 9
- families of the deceased. The recommendation 10
- 11 was that upon conclusion of the ER/PR review,
- a public statement be made stating that if the 12
- 13 next of kin of a deceased patient would like
- 14 the results, that they contact Eastern
- Health." So the numbers provided to you by 15
- Ms. Predham were 176 patients are identified 16
- 17 as being deceased and 101 of those have been
- retested. 18
- 19 MS. HENNESSEY:
- 20 A. Yes.
- 21 CHAYTOR, Q.C.:
- Q. And their results received.
- 23 MS. HENNESSEY:
- A. Yes. 24
- 25 CHAYTOR, Q.C.:

- O. And 65 will not be retested unless the
- 2 families ask. Now if we go back to P-0817
- please? And in the summary that you prepare -3

Page 243

Page 244

- 4 MS. HENNESSEY:
- A. Yes. 5
- 6 CHAYTOR, Q.C.:
- Q. Patients identified as deceased by chart
- 8 review or contact with family member, 176.
- 9 MS. HENNESSEY:
- A. Yes. 10
- 11 CHAYTOR, O.C.:
- Q. "Based on June 2006 ethics review a public 12
- statement will be made at the end of the ER/PR 13
- 14 review that if a family member wants the
- results, they can contact Eastern Health." 15
- And the test results include--and then you 16
- have a list, including 176 deceased. 17
- 18 MS. HENNESSEY:
- A. Yes.
- 20 CHAYTOR, Q.C.:
- Q. And if we look at, please, P-0125, page 33 and 21
- 22 this is the briefing note that goes to the
- 23 Cabinet Secretariat and the Premier's office.
- 24 The information that you've provided, your
- 25 chart -

1 MS. HENNESSEY:

- A. Yes.
- 3 CHAYTOR, Q.C.:
- O. is included here. The test results include
- 6 MS. HENNESSEY:
- 7 A. Yeah, this was a chart that was inserted into
- the note that was -8
- 9 CHAYTOR, Q.C.:
- Q. This is your chart, yes, was inserted.
- 11 MS. HENNESSEY:
- 12 A. Yes.
- 13 CHAYTOR, Q.C.:
- Q. And it includes 176 deceased patients.
- 15 MS. HENNESSEY:
- A. Yes. 16
- 17 CHAYTOR, Q.C.:
- 18 Q. So you've included all 176 in your total
- 19 numbers.
- 20 MS. HENNESSEY:
- A. Yes.
- 22 CHAYTOR, O.C.:
- Q. But Ms. Predham has told you they only have 23
- 24 results on 101.
- 25 MS. HENNESSEY:

May 27, 2008	Multi-Page TM	Inquiry on Hormone Receptor Testing
Pa	nge 245	Page 247
1 A. Yes.	-	TOR, Q.C.:
2 CHAYTOR, Q.C.:		And do you think that would be important
3 Q. There were 65 not retested.	3	information in terms of Eastern Health's
4 MS. HENNESSEY:	4	position to carry forward and have included in
5 A. Yes.	5	the briefing note?
6 CHAYTOR, Q.C.:	6 MS. H	ENNESSEY:
7 Q. Why did you include the entire 176?		Yeah, I think it would have been important
8 MS. HENNESSEY:	8	information that at the time I overlooked.
9 A. I think I just, in preparing it, I put the 176	9 CHAY	TOR, Q.C.:
in, I was taking the information from Heath		Now Ms. Hennessey, this issue regarding the
Predham's note and I just summarized it a		status of the recommendations, this is still
coming up with the number 939. I did not		now within thewithin the note which is
any analysis on the information provided l		forwarded on to Cabinet Secretariat and
Ms. Predham. I moved it from the table, from	·	included in here are reasons for the erroneous
the information that she provided into the		results and steps taken to prevent recurrence,
16 table.	16	and it's written, "Eastern Health has engaged
17 CHAYTOR, Q.C.:	17	external consultants to review the procedures
Q. But you may not have done an analysis, but		at the laboratory. When all reports are
did editing because Ms. Predham has told y	·	received, they will be reviewed and the
20 that only 101 have been retested.	20	recommendations will be implemented. The goal
21 MS. HENNESSEY:	21	is to have the laboratory accredited. Until
22 A. Yes.	22	these processes are completed, all samples
23 CHAYTOR, Q.C.:	23	will continue to be retested at Mount Sinai."
Q. And there was no plans to retest the remain	ing 24	And we've just spent some time looking through
25 65 unless family members requested that.	So 25	the briefing notes and having a discussion
P ₂	nge 246	Page 248
that was Eastern Health's position, 176	1	around the status of the recommendations and
2 people, there were not results received with		whether they're implemented or not.
3 respect to 176 -		ENNESSEY:
4 MS. HENNESSEY:		Right.
5 A. I guess that was an oversight on my part.		TOR, Q.C.:
6 CHAYTOR, Q.C.:		This is now August 18th.
7 Q. And that number gets carried forward?		ENNESSEY:
8 MS. HENNESSEY:	8 A.	Yes.
9 A. Yes.	9 CHAY	TOR, Q.C.:
10 CHAYTOR, Q.C.:	10 Q.	So you would have been aware that all of the
11 Q. And you also didn't provide the information	on 11	reports had been received, they had been
that there was no intention to retest all of	12	received as of late May?
the deceased unless the families requested i	t. 13 MS. H	ENNESSEY:
14 And do you think that might be important	nt 14 A.	Yes, I would have been.
information to -	15 CHAY	TOR, Q.C.:
16 MS. HENNESSEY:	16 Q.	So you were aware of that. And this briefing
17 A. Yes, that information was not included.	17	note, however, goes forward saying "When all
18 CHAYTOR, Q.C.:	18	reports are received, they will be reviewed
19 Q. That information wasn't included.	19	and the recommendations will be implemented."
20 MS. HENNESSEY:		ENNESSEY:
21 A. No.	21 A.	This information and the briefing note itself
22 CHAYTOR, Q.C.:	22	was prepared by Marilyn McCormack at Cabinet
23 Q. And why not?	23	Secretariat, I didn't prepare the note and
24 MS. HENNESSEY:	24	that this information, this would have been
25 A. I guess it was oversight on my part.	25	her understanding based on a discussion with

May 27, 2008	Multi-Page ^{TI}	Inquiry on Hormone Receptor Testing
Pa	age 249	Page 251
1 Heather Predham at Eastern Health.	1 Q.	So you recall specifically speaking to Ms.
2 CHAYTOR, Q.C.:	2	McCormack around this point and Ms. McCormack
3 Q. Now you did seea draft of this briefing note	3	telling you that that was her understanding
4 came to you?	4	based on her discussion with Heather Predham.
5 MS. HENNESSEY:	5 MS. F	IENNESSEY:
6 A. Yes, I did.	6 A.	Yeah, I do recall a brief discussion on that
7 CHAYTOR, Q.C.:	7	point.
8 Q. And it was indicated on the draft that your	8 CHA	YTOR, Q.C.:
9 name would be going forward saying that it had	9 Q.	And that Ms. McCormack said that this is what
been approved by you.	10	Heather Predham had told her?
11 MS. HENNESSEY:	11 MS. F	IENNESSEY:
12 A. Yes.	12 A.	Yes. And the preparation of this particular
13 CHAYTOR, Q.C.:	13	note was being done by Cabinet Secretariat.
14 Q. And you were aware of that?	14 CHA	YTOR, Q.C.:
15 MS. HENNESSEY:	15 Q.	Yes, I understand that.
16 A. Yes.	16 THE	COMMISSIONER:
17 CHAYTOR, Q.C.:	17 Q.	When you're referring to a conversation
18 Q. Did you take that up with Ms. McCormack and	d 18	between Ms. McCormack and Heather Predham, did
19 say, I don't think that's an accurate	19	you understand that that was prior to Ms.
20 statement. All the reports have been	20	McCormack preparing the portion of the note
21 received.	21	that she authored?

Page 252

```
1 CHAYTOR, Q.C.:
    Q. Okay, and what do you recall about your
2
       discussion on that point?
3
4 MS. HENNESSEY:
    A. I recall on that point raising with Ms.
5
       McCormack that the reports from the reviewers
6
7
       had been received by Eastern Health.
```

A. I seem to have--I seem to recall having a

don't recall having it until August 18th.

discussion on this particular point, but I

8 CHAYTOR, Q.C.: Q. So you told that to Ms. McCormack?

10 MS. HENNESSEY:

22 MS. HENNESSEY:

23

24

25

11 A. I recall having that discussion, it was on the 12 18th of August.

13 CHAYTOR, Q.C.:

14 Q. And your discussion was with Ms. McCormack?

15 MS. HENNESSEY:

A. Yes. 16

17 CHAYTOR, Q.C.:

25 CHAYTOR, Q.C.:

Q. And you told her that that was--what's written 18

19 here was contrary to your understanding? 20 MS. HENNESSEY: 21 A. And I think that if I recall the discussion it 22 was her--she had the discussion with Heather 23 Predham and this was her understanding of what 24 Heather had said.

1 MS. HENNESSEY:

24 THE COMMISSIONER:

Q. Or afterwards?

22 MS. HENNESSEY:

23

25

A. - at least a couple of discussions with Heather Predham on this particular note.

3

A. Ms. McCormack had -

4 THE COMMISSIONER:

5 Q. This is probably going to sound like a terribly naive question coming from somebody 6 7 who hasn't had any contact with government

8 operations, but why would Ms. McCormack ask

9 for the information that goes in the table

through you, if she was already talking to Ms. 10

11 Predham, why couldn't she just say send it to

12 me and leave you out of it?

13 MS. HENNESSEY:

14 A. I don't know if I have an answer to that 15 question. I can tell you how this note 16 unfolded, if that might help.

17 THE COMMISSIONER:

Q. Well maybe because it just seems odd that if 18 she was already talking to Ms. Predham, why 19 20 would she even involve you?

21 MS. HENNESSEY:

22

23 24

25

A. The briefing note began shortly after I returned from vacation, that particular week I was committed to another major file which was the Corner Brook long-term care file.

•	
Page 253	Page 255
1 THE COMMISSIONER:	1 still be some recommendations to be
2 Q. Uh-hm.	2 implemented.
3 MS. HENNESSEY:	3 CHAYTOR, Q.C.:
4 A. That we were doing a presentation to Cabinet	4 Q. And this occurs under the heading, "reasons
5 on on the 17th of August on that file. I had	5 for the erroneous results and steps taken to
6 just returned from vacation, we had some	6 prevent recurrence".
7 meetings scheduled and I was trying to get the	7 MS. HENNESSEY:
8 materials together for the Corner Brook long-	8 A. Right.
9 term care project.	9 CHAYTOR, Q.C.:
10 THE COMMISSIONER:	Q. Might it also prevent the reader from going to
11 Q. Uh-hm.	look for the reasons for the erroneous results
12 MS. HENNESSEY:	because it's still a process unfolding?
13 A. This particular week Bev Griffiths, who was	13 MS. HENNESSEY:
our contact on this file was on vacation as	14 A. I certainly don't think that that was the
was John Rumboldt. So, Ms. McCormackbecause	intent. The wording around this, I can't
I was delayed getting engaged in it, because I	speak to, I didn't create the wording in this.
was tied up with another major file, Ms.	17 It might, you know, more helpful for Ms.
18 McCormack -	McCormack to assist you on that.
19 THE COMMISSIONER:	19 CHAYTOR, Q.C.:
20 Q. So, Ms. McCormack going to Predham was the odd	20 Q. Your name goes out as having approved it.
21 thing?	21 MS. HENNESSEY:
22 MS. HENNESSEY:	22 A. Yes.
23 A. Yes -	23 CHAYTOR, Q.C.:
24 THE COMMISSIONER:	24 Q. You didn't think this was accurate
25 Q. She would not have done that had you been	25 information?
Page 254	Page 256
Page 254 1 available, in other words?	Page 256 1 MS. HENNESSEY:
<u> </u>	
1 available, in other words?	1 MS. HENNESSEY:
1 available, in other words? 2 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. No.
 available, in other words? MS. HENNESSEY: A. That's not normal process. 	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.:
 available, in other words? MS. HENNESSEY: A. That's not normal process. THE COMMISSIONER: 	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward?
 available, in other words? MS. HENNESSEY: A. That's not normal process. THE COMMISSIONER: Q. I see, okay. Still not sure I understand why, 	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY:
 available, in other words? MS. HENNESSEY: A. That's not normal process. THE COMMISSIONER: Q. I see, okay. Still not sure I understand why, since she was going that route, she had to 	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The
 available, in other words? MS. HENNESSEY: A. That's not normal process. THE COMMISSIONER: Q. I see, okay. Still not sure I understand why, since she was going that route, she had to involve you at all, but that's beside the 	 MS. HENNESSEY: A. No. CHAYTOR, Q.C.: Q. Why is it that you let this go forward? MS. HENNESSEY: A. Well, I didn't let the note go forward. The note was over in Cabinet Secretariat and they
 available, in other words? MS. HENNESSEY: A. That's not normal process. THE COMMISSIONER: Q. I see, okay. Still not sure I understand why, since she was going that route, she had to involve you at all, but that's beside the point, I guess. 	 MS. HENNESSEY: A. No. CHAYTOR, Q.C.: Q. Why is it that you let this go forward? MS. HENNESSEY: A. Well, I didn't let the note go forward. The note was over in Cabinet Secretariat and they would have made the decision when the note
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward.
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes.	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.:
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.:	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and -
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY:
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came -
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.:
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.:	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY:
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.: 20 Q. What impression would that statement leave the	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.: 20 Q. What impression would that statement leave the 21 recipient of the information?	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister 19 for his review.
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.: 20 Q. What impression would that statement leave the 21 recipient of the information? 22 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister 19 for his review. 20 CHAYTOR, Q.C.: 21 Q. Mr. Abbott? 22 MS. HENNESSEY:
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.: 20 Q. What impression would that statement leave the 21 recipient of the information? 22 MS. HENNESSEY: 23 A. That would statement would leave the recipient	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister 19 for his review. 20 CHAYTOR, Q.C.: 21 Q. Mr. Abbott? 22 MS. HENNESSEY: 23 A. Yes.
1 available, in other words? 2 MS. HENNESSEY: 3 A. That's not normal process. 4 THE COMMISSIONER: 5 Q. I see, okay. Still not sure I understand why, 6 since she was going that route, she had to 7 involve you at all, but that's beside the 8 point, I guess. 9 MS. HENNESSEY: 10 A. Yes. 11 THE COMMISSIONER: 12 Q. Just another oddity. 13 CHAYTOR, Q.C.: 14 Q. Ms. Hennessey, this whole statement "when all 15 reports are received, they will be reviewed 16 and the recommendations will be implemented". 17 MS. HENNESSEY: 18 A. Right 19 CHAYTOR, Q.C.: 20 Q. What impression would that statement leave the 21 recipient of the information? 22 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. No. 3 CHAYTOR, Q.C.: 4 Q. Why is it that you let this go forward? 5 MS. HENNESSEY: 6 A. Well, I didn't let the note go forward. The 7 note was over in Cabinet Secretariat and they 8 would have made the decision when the note 9 went forward. 10 CHAYTOR, Q.C.: 11 Q. But it came to you and - 12 MS. HENNESSEY: 13 A. The note came - 14 CHAYTOR, Q.C.: 15 Q. what did you do with it? The note came to you 16 in draft form and what did you do with it? 17 MS. HENNESSEY: 18 A. I sent the draft note to the deputy minister 19 for his review. 20 CHAYTOR, Q.C.: 21 Q. Mr. Abbott? 22 MS. HENNESSEY:

May 27, 2008	Multi-Page	Inquiry on Hormone Receptor Testing
Pag	e 257	Page 259
1 told the Commissioner in earlier briefing	1 CHA	YTOR, Q.C.:
2 notes was changing the briefing notes to	2 Q	. It's at P-0171, your e-mail to Mr. Abbott.
3 indicate that the recommendations had already	3	And you're indicating to Mr. Abbott, "FYI and
4 been implemented.	4	review. This note will likely go to the
5 MS. HENNESSEY:	5	Premier's office later today or tomorrow".
6 A. Right.		HENNESSEY:
7 CHAYTOR, Q.C.:	7 A	Yeah, when I received the draft note, I went
8 Q. Did Mr. Abbott come back to you with any	8	down to see Mr. Abbott, but he wasn't
9 commentary on the note?	9	available and so I sent the note. In fact, on
10 MS. HENNESSEY:	10	the morning of August 17, Mr. Abbott was in
11 A. Mr. Abbott did not come back to me on this	11	Cabinet doing the presentation on Corner Brook
12 note.	12	Long Term Care. So, I wasn't able to connect
13 THE COMMISSIONER:	13	personally with Mr. Abbott, so I did send a
14 Q. Are you indicating that when, I understood	14	note.
15 that what happened is you sent the table to		YTOR, Q.C.:
Ms. McCormack and Ms. McCormack incorpora		. If we could go back to 0819, please? And this
17 your table into the draft note and sent the	17	is an e-mail communication August 14, 2006
draft note back to you?	18	from yourself to Ms. McCormack. "Hi Marilyn,
19 MS. HENNESSEY:	19	sorry for the delay. Today I got sidetracked.
20 A. Yes, the draft note came back to me, it -	20	I have reviewed the note and would suggest a
21 THE COMMISSIONER:	21	couple of changes". So, you've reviewed the
Q. At some point before the 18th?	22	note at this point in time that she's
23 MS. HENNESSEY:	23	provided.
24 A. There was a note came back on the 17th.		HENNESSEY:
25 THE COMMISSIONER:	25 A	. Yes.
_	e 258	Page 260
1 Q. On the 17th?		YTOR, Q.C.:
2 MS. HENNESSEY:	2 Q	. And under "background" third bullet, you're
3 A. Yes.	3	asking her to "delete reference to the 20
4 THE COMMISSIONER:	4	percent test results are erroneous as I can't
5 Q. Did you, at that time, read what was in the	5	confirm this. Under current status (pathology
6 note?	6	reports) I have prepared a couple of bullets
7 MS. HENNESSEY:	7	to replace what is in the note. The
8 A. I did -	8	information provides a lot of detail on the
9 THE COMMISSIONER:	9	status of the 939 patients and their test
10 Q. Or did you just send it on to Mr. Abbott?	10	results. Yvonne Power is making the final
11 MS. HENNESSEY:	11	changes early tomorrow and I asked her to send
12 A. No, I'm sure I would have read the note, but		it to you as soon as it is done. I am on
did send it on to Mr. Abbott that day.	13	route to Labrador with the minister". Another
14 THE COMMISSIONER:	14	bullet, "you may wish to highlight the Myrtle
Q. Okay. And when you sent it to Mr. Abbott, o		Lewis situation given the media attention. If
you point out to him this what you viewed as		you have any questions you can e-mail me as I
17 an inaccurate statement?	17	have the note from Heather P. and the
18 MS. HENNESSEY:	18	Blackberry with me". Now, Ms. Hennessey,
19 A. In my e-mail to Mr. Abbott, I think I said,	19	you're certainly giving direction to Ms.
for his review. I was expecting Mr. Abbott to		McCormack regarding certain aspects of the
come back to have some discussion with me		note?
22 this note since it was the first note where we		HENNESSEY:
had the test results.		YES.
24 THE COMMISSIONER:		YTOR, Q.C.: Okoy Did you indicate to her envihing in
25 Q. Um-hm.	25 Q	Okay. Did you indicate to her anything in
		Page 257 - Page 260

1

7

Page 261

- reports having been received and to your 2
- knowledge the recommendations implemented? 3

terms of the issue of the recommendations, the

- 4 MS. HENNESSEY:
- 5 A. I do not recall a discussion. As the time
- notes on that e-mail, I was doing it at 10:30 6
- at night because I had been busy all day, that 7
- 8 Ms. McCormack was waiting for the information
- in the table and I was trying to do it before 9
- 10 I left on a flight early the following morning
- to go to Labrador with the minister. 11
- 12 CHAYTOR, Q.C.:
- Q. Yes. And I just want to be clear in terms of 13
- who drafted what in the briefing note. 14
- 15 MS. HENNESSEY:
- A. Right, yes. 16
- 17 CHAYTOR, Q.C.:
- 18 Q. Because there's certainly, you certainly had
- 19 input into the content.
- 20 MS. HENNESSEY:
- A. I certainly had input into the briefing note, 21
- 22 yes, I certainly provided the table for that
- briefing note. 23
- 24 CHAYTOR, Q.C.:
- 25 Q. Yes, and you also suggested certain things be

August 18th. And I don't know whether time

Page 263

- 2 was there to do some further edits on the
- note, but I do recall just a very brief 3
- discussion on the point. 4
- 5 CHAYTOR, Q.C.:
- Q. What was your difficulty with the reference to 6
 - the 20 percent of the test results being
- 8 erroneous?
- 9 MS. HENNESSEY:
- 10 A. At that point in time I was taking the
- information from Eastern Health, the 11
- 12 information that Heather Predham provided to
- me and moving that information into a table 13
- 14 for Ms. McCormack. I was not doing any
- interpretation of the data in the table. 15
- 16 CHAYTOR, Q.C.:
- Q. Where did you understand this 20 percent had 17
- 18 come from?
- 19 MS. HENNESSEY:
- A. I would have--the 20 percent didn't come from 20
- Eastern Health. 21
- 22 CHAYTOR, O.C.:
- Q. It didn't? How do you know that?
- 24 MS. HENNESSEY:
- A. As far as I know the only information provided
- Page 262
- deleted. And this reference -1
- 2 MS. HENNESSEY:
- A. Yes, I did.
- 4 CHAYTOR, Q.C.:
- Q. to the 20 percent, in fact, is deleted.
- 6 MS. HENNESSEY:
- A. Yes.
- 8 CHAYTOR, O.C.:
- Q. That doesn't appear in the note?
- 10 MS. HENNESSEY:
- 11 A. No.
- 12 CHAYTOR, Q.C.:
- Q. Okay. And in terms of the issue, though, 13
- regarding whether all the reports had been 14
- received, are you saying that you took that up 15
- with Ms. McCormack but that she wasn't 16
- 17 receptive to your suggestion for a change?
- 18 MS. HENNESSEY:
- A. I took the particular point around that it was 19
- quite late, it was on the 18th of August when 20
- I remember having a brief discussion with her 21
- 22 at that time. And the--at that time the wish
- was--she was putting the note into, you know, 23
- 24 having it circulated within the cabinet
- secretariat that afternoon, which was the 25

- Page 264 from Eastern Health was the information that
- they provided to me. 2
- 3 CHAYTOR, Q.C.:

1

- Q. But Ms. McCormack is speaking with Ms.
- 5 Predham?
- 6 MS. HENNESSEY:
- A. Yeah, well, maybe she got that from Ms. 7
- Predham, but I don't--I'm not inclined to 8
- think so.
- 10 CHAYTOR, Q.C.:
- Q. Why not?
- 12 MS. HENNESSEY:
- 13 A. Because I think Ms. Predham was--the only
 - information that she provided was what was in
- the information that she gave to me. 15
- 16 CHAYTOR, O.C.:
- 17 Q. But she gave other information to Ms.
- McCormack? 18
- 19 MS. HENNESSEY:
- A. Yes, yeah.
- 21 CHAYTOR, Q.C.:
- Q. Yes. And she had discussion with Ms. 22
- McCormack around whether the reports were all 23
- 24 received or not?
- 25 MS. HENNESSEY:

Multi-Page TM **Inquiry on Hormone Receptor Testing** Page 265 Page 267 Q. And this begins with Ms. McCormack to you? A. Right. I mean, she could have had a 1 2 discussion on that point, I can't say for 2 MS. HENNESSEY: certain, but based on that, Ms. McCormack--I A. Yes. 3 3 don't remember any further discussion with Ms. 4 CHAYTOR, Q.C.: 4 McCormack on that particular point. 5 5 Q. On August 15th. And you are now in Labrador, 6 CHAYTOR, Q.C.: apparently. 6 7 MS. HENNESSEY: Q. So you don't know where the reference to 20 7 8 percent came from? A. Yes. 9 MS. HENNESSEY: 9 CHAYTOR, O.C.: A. No. Q. And she says, "Hi Moira, Hope your trip to 10 Labrador is going well. Sorry to bother you 11 CHAYTOR, O.C.: 11 again on this note, but I'm trying to ensure I Q. And I just want to be clear, and your concern 12 12 in referring to the 20 percent was that it am reading the information correctly." So is 13 13 hadn't been in the numbers given to you by Ms. it fair to say that Ms. McCormack was 14 14 Predham? certainly keen to make sure she got the 15 15 16 MS. HENNESSEY: 16 information correct? A. Yes. And I was reporting the information on 17 MS. HENNESSEY: 17 18 the test results. 18 A. Yes, she would have received the table that I 19 CHAYTOR, O.C.: 19 had one of the administrative assistants send Q. Given by Ms. Predham? on my behalf at that time. 20 20 21 MS. HENNESSEY: 21 CHAYTOR, Q.C.: 22 A. Yeah. Albeit I did miss the point that you 22 Q. Okay. And I think that's attached here, this referenced with respect to the retesting of is your--this is what's attached? 23 23 the deceased patients. 24 MS. HENNESSEY: 24 25 CHAYTOR, Q.C.: A. Yes. Page 266 Page 268 Q. That is the 101 results received? 1 CHAYTOR, Q.C.: 2 MS. HENNESSEY: Q. That's the information that you had sent? 3 MS. HENNESSEY: A. Yes. A. Yes. 4 CHAYTOR, O.C.: Q. Not 176? 5 CHAYTOR, Q.C.: 6 MS. HENNESSEY: Q. Okay. And it says that she has a number of 6 A. Yes. questions for you. 7 8 CHAYTOR, O.C.: 8 MS. HENNESSEY: A. That's right. Q. And bearing in mind what your instructions had been from Mr. Abbott and in terms of including 10 10 CHAYTOR, Q.C.: numbers and information given by Eastern 11 11 Q. "I received the briefing note from Yvonne as Health? you directed. I still have a few questions". 12 12 13 MS. HENNESSEY: 13 MS. HENNESSEY: A. Yes, I was reporting the information that A. Yes. 14 14 Eastern Health gave me and I wasn't in a--that 15 CHAYTOR, Q.C.: 15 particular e-mail, like I said, I was writing Q. Okay. So what exactly was it that she 16 17 at 10:30 at night. I was trying to do my best 17 received from Yvonne? to get information to Ms. McCormack. 18 MS. HENNESSEY: 18 19 CHAYTOR, Q.C.: A. She received the table from Yvonne. Q. If we could look at 0820, please? This is an 20 20 CHAYTOR, O.C.: e-mail exchange again with respect to the same 21 Q. Just the table you drafted?

22 MS. HENNESSEY:

A. Yes.

24 CHAYTOR, O.C.:

23

25

Page 265 - Page 268

Q. Can you tell me about the--and she would refer

22

24

23 MS. HENNESSEY:

A. Yeah.

25 CHAYTOR, Q.C.:

note between yourself and Ms. McCormack.

Page 269 Page 271 to that as a briefing note even though it's 1 1 CHAYTOR, Q.C.: 2 just a table. Q. And you had that note with you? 3 MS. HENNESSEY: 3 MS. HENNESSEY: A. That was her terminology. What I sent to Ms. A. Yes, I did. At this point in time, it was McCormack or had sent on my behalf was the quarter to eight in the morning and I know I 5 5 was trying to get the information to Ms. table. 6 7 CHAYTOR, O.C.: McCormack as quickly as I could because there 7 was a meeting, if I recall correctly, that 8 Q. She says, "can you tell me about the 8 Newfoundland Panel? Did they review the morning at 8:00. So, I was trying to answer 9 9 10 results here prior to the tests going to Mount 10 her questions from Labrador. Sinai"? She also has a question regarding 11 CHAYTOR, O.C.: 11 "the note indicates 28 patients' test results 12 12 Q. Okay. And to your knowledge, were those 28 confirm negative by Newfoundland Panel. Were patients, patients whose positivity, ER 13 13 these tests also sent to Mount Sinai (or not)? positivity ranged between 1 and 10 percent? 14 14 And if so, I assume the results were the same 15 MS. HENNESSEY: 15 16 for Mount Sinai as found by the Newfoundland 16 A. Ms. Chaytor, I wouldn't be able to assist you panel"? And if we just look at that for a 17 17 on that. minute, that's the 28 patients, I take it, 18 18 CHAYTOR, O.C.: "here patient test results confirmed negative 19 Q. And were you aware of what Mount Sinai by Newfoundland panel 28". considered positive at the time as opposed to 20 20 21 MS. HENNESSEY: what St. John's considered positive at that 21 22 A. Yes. 22 time? 23 CHAYTOR, Q.C.: 23 MS. HENNESSEY: Q. "Patients whose original test results were A. No, I wouldn't--I would have been trying to 24 considered negative by"--that should be move information from a document that Eastern 25 25 Page 270 Page 272 physicians "treating and treated 1 Health sent to me to try and answer Ms. 1 2 appropriately. There was a slight change in 2 McCormack's questions at that time. ER/PR status and reviewed by a panel confirmed 3 3 CHAYTOR, Q.C.: negative ER/PR status". And your answer back 4 Q. Did you ever send along Ms. Predham's 4 5 to Ms. McCormack on that, "Hi Marilyn, I will 5 information to Ms. McCormack? Did you ever answer your questions as best I can from a give that to her directly? 6 6 distance". So, you're responding to her from 7 7 MS. HENNESSEY: 8 Labrador and you tell her the Newfoundland A. I don't recall sending that three-pager to Ms. 9 panel reviewed 422 results after they came 9 McCormack. back from Mount Sinai and those results are 10 CHAYTOR, Q.C.: 10 11 included in the 939 tissue samples. You tell 11 Q. And you had that with you though on your her who the panel consists of. "The 28 test system? 12 12 results confirmed as negative by the 13 13 MS. HENNESSEY: Newfoundland panel were sent to Mount Sinai. 14 A. I did have--no, I had a--I was in Labrador. 15 The panel chose to review those results 15 CHAYTOR, Q.C.: because there was a slight change on the 16 o. Yes. 17 patient's ER/PR status from time of original 17 MS. HENNESSEY: diagnosis to retesting". And I take it that's A. I had it in my hand, I had a hard copy with 18 18 19 information you received from Ms. Predham, is 19 that right? 20 20 CHAYTOR, O.C.: 21 21 MS. HENNESSEY: Q. You didn't have it on your Blackberry. You A. That's information that would have been my 22 would have had it on your Blackberry? 22 interpretation of information, what I had with 23 MS. HENNESSEY: 23 me when I was travelling in Labrador was the 24 24 A. I may have had it on my Blackberry, but I

25

certainly wouldn't have been trying to read of

note from Ms. Predham at Eastern Health.

May 21, 2000	Muiti-rage inquiry on normone Receptor Testing
	Page 273 Page 275
a Blackberry and answer any questions	
2 remember having the document with me	2 CHAYTOR, Q.C.:
3 CHAYTOR, Q.C.:	3 Q. And then if we can go back to 0171 please.
4 Q. Forward your document directly on toy	
an electronic format of it? You didn't th	=
6 to -	6 information on the Newfoundland panel and
7 MS. HENNESSEY:	7 their role with Heather Predham. "I include
8 A. Pardon?	8 an extra bullet under 'background', last
9 CHAYTOR, Q.C.:	9 bullet, to describe the panel and their role.
10 Q just forward the e-mail on that you'	-
received from Ms. Predham.	reference again to the panel. In my opinion
12 MS. HENNESSEY:	
	the note is clear now and with your approval,
13 A. I didn't think to do that. I thought I wa	
trying to be helpful to Ms. McCormac	
taking the information from Eastern Hea	
summarizing it.	16 A. Yes.
17 CHAYTOR, Q.C.:	17 CHAYTOR, Q.C.:
18 Q. Um-hm. Okay, and this is where you in	· · · · · · · · · · · · · · · · · · ·
to her that if you need this info. today, yo	
20 can check with Heather Predham directly	. 20 likely go to the PO later today or tomorrow.
21 MS. HENNESSEY:	So, it appears that Ms. McCormack had
22 A. Yeah.	certainly been in contact with Ms. Predham as
23 CHAYTOR, Q.C.:	this point in time?
24 Q. So, I take it up to this point in time, Aug	ast 24 MS. HENNESSEY:
25 16, she had not been in contact directly v	rith 25 A. Yes.
	Page 274 Page 276
1 Ms. Predham?	1 CHAYTOR, Q.C.:
2 MS. HENNESSEY:	2 Q. If we could look at 0192 please? So, in
3 A. I don't know; I don't recall whether she was	addition to forwarding it onto Mr. Abbott, you
4 in contact before that time.	also then send it onto Debbie Humphries and
5 CHAYTOR, O.C.:	5 you ask her, "can you please put this in
6 Q. And you've indicated in answering the	6 Eastern's directory".
_	
7 Commissioner's questions, it would be unust	
8 for herthat would be an unusual line of	
9 communication, Marilyn McCormack at Ca	
Secretariat to Heather Predham at Eastern	Q. Who is Debbie Humphries?
11 Health.	11 MS. HENNESSEY:
12 MS. HENNESSEY:	12 A. Debbie Humphries is one of the administrative
13 A. It is an unusual line of communication.	assistants who works in my branch.
14 CHAYTOR, Q.C.:	14 CHAYTOR, Q.C.:
15 Q. And do you have any reason to think prior to	
you directing her to follow-up if need be with	· · · · · · · · · · · · · · · · · · ·
Heather on August 16, that Ms. McCormack	had 17 MS. HENNESSEY:
bene in touch with Heather Predham?	18 A. In Eastern's directory within the board
19 MS. HENNESSEY:	services or the regional health operations
20 A. Well, Ms. McCormack was drafting the no	te 20 branch within the board services division.
21 during the previous week.	There is an electronic, on Eastern Health's
22 CHAYTOR, Q.C.:	22 Electronic directory.
23 Q. So, you think she had had discussions with -	23 CHAYTOR, Q.C.:
la	24 O And so you're solving hants mut this in their

25

Q. And so you're asking her to put this in their

electronic directory?

A. Yes, I think that she was in contact with

24 MS. HENNESSEY:

16 to ask how many women were most impacted by

the change in status of the ER/PR receptor

testing. She gave me the number 22 as

indicated on the third page of the briefing

20 note. Gary also wanted to know how many were

21 likely to initiate legal action and according

to Heather, any or all of the 939 women or

their families could do so. Exact numbers

24 would not be known at this time. She

explained that even if the results were

16 12:41 p.m.

17 MS. HENNESSEY:

18 A. Right.

21

22

25

19 CHAYTOR, Q.C.:

20 Q. And you're saying for his review. And the

note will likely go to the premier later today

or tomorrow. And we look at the note that's

attached. Under "current status" or sorry,

under "summary", you have reference to the

legal action initiated by Mrs. Lewis. There's

Pa	ge 281
reference to "Eastern Health advises 22 won	nen

- were impacted by the change in status of the
- 3 ER receptor tests. These women had changes in
- 4 the progress of their disease from the initial
- 5 confirmation of the disease in the beginning
- and their treatment to retesting done at Mount
- 7 Sinai". And then it continues on with another
- 8 paragraph under "summary".
- 9 MS. HENNESSEY:
- 10 A. Right.
- 11 CHAYTOR, Q.C.:
- 12 Q. And this note is dated August 18, 2006.
- 13 MS. HENNESSEY:
- 14 A. Yes.
- 15 CHAYTOR, O.C.:
- 16 Q. And that is attached, at least, in what we
- have forwarded to us here, to an exhibit and
- an e-mail that was forwarded to Mr. Abbott,
- 19 August 17, 2006.
- 20 MS. HENNESSEY:
- 21 A. Um-hm.
- 22 CHAYTOR, Q.C.:
- Q. And that was at 12:41 p.m. If we could look
- again at P-0192, please? And this is your e-
- 25 mail to Debbie Humphries.

- 1 MS. HENNESSEY:
- 2 A. Right.
- 3 CHAYTOR, Q.C.:
- Q. And we see the heading "current status".

Page 283

Page 284

- 5 MS. HENNESSEY:
- 6 A. Yes.
- 7 CHAYTOR, O.C.:
- 8 Q. And no summary section.
- 9 MS. HENNESSEY:
- 10 A. Okay. So, it would be the note, the August
- 17 17th note that went to Mr. Abbott for his
- 12 review.
- 13 CHAYTOR, O.C.:
- 14 Q. Okay. So, what you're saying is that this
- same note that you asked Ms. Humphries to put
- in the directory -
- 17 MS. HENNESSEY:
- 18 A. Right.
- 19 CHAYTOR, Q.C.:
- 20 Q. would have been the one that you sent to Mr.
- 21 Abbott.
- 22 MS. HENNESSEY:
- 23 A. Yeah, I would have sent the note dated August
 - 17 to -
- 25 CHAYTOR, Q.C.:

24

Page 282

1 Q. Mr. Abbott.

- 2 MS. HENNESSEY:
- 3 A. Mr. Abbott.
- 4 CHAYTOR, Q.C.:
- 5 Q. Not the draft note of the 18th?
- 6 MS. HENNESSEY:
- 7 A. (No audible response).
- 8 CHAYTOR, Q.C.:
- 9 Q. Okay. So, this one at--the one that we see
- 10 here at 0192 -
- 11 MS. HENNESSEY:
- 12 A. Right.
- 13 CHAYTOR, Q.C.:
- 14 Q. the August 17th version is the one you would
- have sent to Mr. Abbott?
- 16 MS. HENNESSEY:
- 17 A. Yes, it was an August 17 note that I sent to
- 18 Mr. Abbott.
- 19 CHAYTOR, Q.C.:
- 20 Q. Okay. Otherwise it makes no sense. Two
- minutes later you ask her to put a different
- version in the Eastern Director.
- 23 MS. HENNESSEY:
- 24 A. No.
- 25 CHAYTOR, Q.C.:

1 MS. HENNESSEY:

- 2 A. Okay.
- 3 CHAYTOR, Q.C.:
- 4 Q. I'm sorry, this is page--page one please.
- 5 This is your e-mail to Debbie Humphries.
- 6 MS. HENNESSEY:
- 7 A. Right.
- 8 CHAYTOR, Q.C.:
- 9 Q. Same date, August 17, 2006, two minutes later,
- 10 12:43 p.m. "Debbie, can you put this, please
- put this is Eastern's directory. Thanks.
- 12 Moira".
- 13 MS. HENNESSEY:
- 14 A. Yes.
- 15 CHAYTOR, Q.C.:
- 16 Q. And again it's the same e-mail that had been
- forwarded to you from Marilyn, you had
- forwarded it on to Mr. Abbott and now two
- minutes later, to Ms. Humphries.
- 20 MS. HENNESSEY:
- 21 A. Yeah.
- 22 CHAYTOR, Q.C.:
- 23 Q. And you're asking Ms. Humphries to put in the
- 24 directory--sorry--a briefing note dated August
- 25 17, 2006.

1/14/2/1/2000	i ruge inquiry on from one receptor resums
Page 285	Page 287
1 Q. Now, if we could look please at P-0172 and	1 CHAYTOR, Q.C.:
2 this is the e-mail from Ms. Hennessey where	2 Q that you hadand originally answered that
3 looked at this before the break where she says	question, that you had further thought about
4 it's the final copy and she's had further	4 the issue.
5 discussion with Heather Predham and the number	5 MS. HENNESSEY:
6 22 has been given to her as the"she gave me	6 A. Yes, I did.
7 the number 22 because she was looking for the	7 CHAYTOR, Q.C.:
8 number of women most impacted.	8 Q. And what is it, on reflection, that you want
9 MS. HENNESSEY:	9 to change from what you originally told us
10 A. Yes.	about that issue, as to how the word "greatly"
11 CHAYTOR, Q.C.:	came to be omitted from the text?
12 Q. And if we come down under this, in this	12 MS. HENNESSEY:
version, there is a summary which refers again	13 A. I did make a mistake when we met back in
to Mrs. Myrtle Lewis's action.	January/February with respect to the last
15 MS. HENNESSEY:	version of the note that I saw, and the last
16 A. Right.	version does not have the word "greatly" in
17 CHAYTOR, Q.C.:	17 it.
18 Q. And then "Eastern Health advises 22 women were	18 CHAYTOR, Q.C.:
19 greatly impacted -	19 Q. And this is the last version that you saw
20 MS. HENNESSEY:	20 didn't have the word "greatly"?
21 A. Yes.	21 MS. HENNESSEY:
22 CHAYTOR, Q.C.:	22 A. The last version that I have does not have the
23 Q by the change in status of the ER/PR	word "greatly" in it.
receptor status," and the word "greatly" is	24 CHAYTOR, Q.C.:
inserted. Now if we go back, please, to 0125	25 Q. And what about theif we could just look in
25 mostrous 110 m m go cuent, prouse, to 0125	20 Q. Time what do out the in we could just foot in
Daga 296	Dog 200
Page 286	
1 page 33, this is the version of the note that	terms of then your discussionso the last
page 33, this is the version of the note that ends up going to the Premier's office?	terms of then your discussionso the last version that you had of the note didn't have
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY:	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it?
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes.	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY:
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.:	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct.
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.:
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version?
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY:
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note?	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY:	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion,	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly"	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted.
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted.
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.:	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.: Q. Now Ms. Hennessey, we were advised by Mr.	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with Ms. McCormack around that issue?
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.: Q. Now Ms. Hennessey, we were advised by Mr. Pritchard that since we originally asked you	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with Ms. McCormack around that issue?
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.: Q. Now Ms. Hennessey, we were advised by Mr.	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with Ms. McCormack around that issue? MS. HENNESSEY: A. Yes, I do.
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.: Q. Now Ms. Hennessey, we were advised by Mr. Pritchard that since we originally asked you	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with Ms. McCormack around that issue? MS. HENNESSEY: A. Yes, I do.
page 33, this is the version of the note that ends up going to the Premier's office? MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we come down under summary, the summary is there, but it says "Eastern Health advises 22 women were impacted by the change in status of the ER/PR receptor tests." The word "greatly" is omitted. Can you shed any light on why the word "greatly" is omitted from this portion of the note? MS. HENNESSEY: A. The word "greatly" when the final note was sent, Ms. McCormack and I had a discussion, brief discussion on it and the word "greatly" did not appear in the information that I had received from Eastern Health, so we agreed to remove the word. CHAYTOR, Q.C.: Q. Now Ms. Hennessey, we were advised by Mr. Pritchard that since we originally asked you that question in your interview -	terms of then your discussionso the last version that you had of the note didn't have the word "greatly" in it? MS. HENNESSEY: A. That's correct. CHAYTOR, Q.C.: Q. Okay, and what do you now recollect in terms of how the word "greatly" then is removed from the final version? MS. HENNESSEY: A. What I recollect, it was in my final discussion with Ms. McCormack on the 18th of August, I wasn't comfortable using the word "greatly". I don'tthe word wasn't in the information provided by Eastern Health. I don't have a medical background and wouldn't be able to interpret the degree to which patients would be impacted. CHAYTOR, Q.C.: Q. So you recall now having had a discussion with Ms. McCormack around that issue? MS. HENNESSEY: A. Yes, I do.

word "greatly"?	
-----------------	--

- 2 MS. HENNESSEY:
- A. No, I did not instruct her to remove it. We 3
- agreed to take the word out. 4
- 5 CHAYTOR, Q.C.:

7

- Q. Okay, and the reason for that being what? Why 6
 - was it that that was a contentious issue or
- 8 why did you feel that word needed to come out?
- 9 MS. HENNESSEY:
- A. As I said, the word did not show up in the 10
- information that Eastern Health provided to me 11
- and, given my background, I wouldn't be able 12
- to interpret the degree to which patients were 13
- 14 impacted.
- 15 CHAYTOR, O.C.:
- Q. Okay. But Ms. Hennessey, did any of this 16
- information come out of the information given 17
- to you, or according to Ms. McCormack's e-18
- mail, this portion would have arisen from her 19
- discussions with Ms. Predham. 20
- 21 MS. HENNESSEY:
- 22 A. Yes.
- 23 CHAYTOR, Q.C.:
- Q. And she was trying to ascertain, I believe she 24
- says, on--Mr. Cake may have had some question 25

Page 290

- around it as well. They were trying to 1
- ascertain how many people were most impacted. 2
- 3 MS. HENNESSEY:

5

- A. Yeah. I mean, that information would have 4
 - come from her discussion with Ms. Predham and
- it would have been her understanding of 6
- information that Ms. Predham communicated. 7
- 8 THE COMMISSIONER:
- Q. So I'll just once again make sure that I'm 9
- understanding. Ms. McCormack spoke to Ms. 10
- 11 Predham and on the basis of her understanding
- of what Ms. Predham had said -12
- 13 MS. HENNESSEY:
- A. Yes. 14
- 15 THE COMMISSIONER:
- Q. she inserted the word "greatly"?
- 17 MS. HENNESSEY:
- A. Yes. 18
- 19 THE COMMISSIONER:
- Q. You suggested that she remove the word 20
- "greatly" because it was not in the material 21
- that Eastern Health had provided to you? 22
- 23 MS. HENNESSEY:
- 24 A. That's correct.
- 25 THE COMMISSIONER:

Q. And the material provided to you by Eastern--

Page 291

Page 292

- 2 are you saying it was not in the material
- provided to you by Eastern Health immediately 3
- before this was prepared? 4
- 5 MS. HENNESSEY:
- A. Yes, it was in that note that I used to 6
- 7 prepare the table.
- 8 THE COMMISSIONER:
- Q. Yes, okay, and your problem was you hadn't
- 10 been told "greatly" and you didn't feel that
- you could interpret greatly in the context? 11
- 12 MS. HENNESSEY:
- A. That's correct.
- 14 THE COMMISSIONER:
- 15 Q. Okay.
- 16 CHAYTOR, Q.C.:
- Q. If we could look at 1477, please? And this is 17
- the letter I referred you to earlier. 18
- 19 MS. HENNESSEY:
- A. Yes. 20
- 21 CHAYTOR, Q.C.:
- 22 Q. Where Mr. Pritchard writes to me and Mr.
- Coffey on May 23rd, 2008 pointing out the 23
- changes or the clarifications that you wish to 24
- make in your evidence, and if we look at page 25

2

11

22

23

25

- three on this, the top of the page, Mr. 1
 - Pritchard writes "on August 18th" and again,
 - he's summarizing what he understands from you. 3
 - "In relation to the 18th of August 2006 4
 - briefing note, she states 'on August 18th, Ms. 5
 - McCormack sent a note to me at 10:59 a.m. 6
 - 7 indicating it was the final note, if I
 - approved of same. She subsequently called me. 8
 - I advised her that I was not in a position to 9
 - approve the note, as I had not heard back from 10
 - Mr. Abbott. During the conversation, we
 - agreed to remove the word greatly from page 12
 - three, as the word was not used in the draft 13
 - test results document provided by Heather 14
 - Predham, Eastern Health.'" 15
 - Ms. McCormack (sic.) what's the 16
 - 17 significance to the fact that you weren't in a
 - position to approve of the note as you hadn't 18
 - heard back from Mr. Abbott? 19
 - 20 MS. HENNESSEY:
 - 21 A. Well, my name was on the note saying approved
 - by Moira Hennessey, and normally my notes
 - would go to Mr. Abbott for final review. So I
 - was not prepared to sign off on the note 24
 - because I hadn't heard back from Mr. Abbott.
 - Page 289 Page 292

1 CHAYTOR, O.C.:

- Q. Okay, and did you ever hear back from Mr.
- Abbott? 3
- 4 MS. HENNESSEY:
- A. No, I didn't. 5
- 6 CHAYTOR, Q.C.:
- Q. Okay. So did you ever sign off on this note?
- 8 MS. HENNESSEY:
- A. No, I didn't.
- 10 CHAYTOR, Q.C.:
- 11 Q. And you advised Ms. McCormack of that?
- 12 MS. HENNESSEY:
- A. Yes, in that telephone call.
- 14 CHAYTOR, Q.C.:
- Q. That you weren't prepared to sign off on it? 15
- 16 MS. HENNESSEY:
- A. Yeah, that I wasn't able to approve the note 17
- because I hadn't heard from Mr. Abbott. 18
- 19 CHAYTOR, O.C.:
- Q. Why would you be agreeing to remove then the 20
- word "greatly" from page three? Why would you 21

Q. I'm just wondering then, if you indicated to

her that you can't sign off, you haven't heard

back from Mr. Abbott, why then are you in that

same conversation agreeing to remove a word

- 22 be having any further input on the note if you
- weren't signing off or approving it? 23
- 24 MS. HENNESSEY:

1 CHAYTOR, Q.C.:

2

3

4

5

6

25 A. I'm sorry, I missed the question.

from the document?

Page 294

- - 2 CHAYTOR, Q.C.:

 - those two paragraphs? 5

- 7 MS. HENNESSEY:
- A. We agreed to two final changes at that time. 8
- I certainly said to Ms. McCormack that I 9
- wasn't able to approve the note, but we did -10
- 11 CHAYTOR, Q.C.:
- Q. But you agreed to the final changes? 12
- 13 MS. HENNESSEY:
- 14 A. Yes, we made two changes. One was the word
- "greatly" and the other change was an 15
- editorial, I think there was an E on the word 16
- 17 "law suit" or the word "suit" and we took the-
- -that was the second edit. 18
- 19 CHAYTOR, Q.C.:
- Q. And you recall that distinctly?
- 21 MS. HENNESSEY:
- A. Yes, I recall that distinctly.
- 23 CHAYTOR, Q.C.:
- O. You recall that detail?
- 25 MS. HENNESSEY:

- A. Yeah.
- 2 CHAYTOR, O.C.:
- Q. Ms. Hennessey, but you couldn't sign off on 3

Page 295

Page 296

- the note because you hadn't heard back from 4
- 5 Mr. Abbott?
- 6 MS. HENNESSEY:
- A. Right.
- 8 CHAYTOR, Q.C.:
 - Q. But then you agree to take the word "greatly"
- 10 out of the note?
- 11 MS. HENNESSEY:
- A. Yes, we did.
- 13 CHAYTOR, Q.C.:
- 14 Q. And as I just took you through and showed you
- the draft version that you say would have been 15
- 16 the August 17th version that Mr. Abbott had
- been forwarded -17
- 18 MS. HENNESSEY:
- A. Yes.
- 20 CHAYTOR, Q.C.:
- Q. that version didn't even have a summary 21
- 22 paragraph in it, let alone the word "greatly"
- 23
- or anything else. That whole paragraph or two 24
 - paragraphs didn't appear in this version.
- 25 MS. HENNESSEY:

A. No, that's correct, yeah.

- Q. So did you have concern that you are editing
- and taking out a word, but he hasn't even seen 4
- 6 MS. HENNESSEY:
- A. I didn't have a major concern. At that time, 7
- I thought I would hear from the deputy 8
- minister about the draft note, certainly would 9
- have had a discussion with him -10
- 11 CHAYTOR, Q.C.:
- Q. But that never happened?
- 13 MS. HENNESSEY:
- 14 A. - if I had heard from him.
- 15 CHAYTOR, Q.C.:
- Q. But that never happened?
- 17 MS. HENNESSEY:
- A. That didn't happen, no.
- 19 CHAYTOR, Q.C.:
- Q. And what happened to the note?
- 21 MS. HENNESSEY:
- A. The note was circulated to, I guess, the 22
- individuals who are listed on the note. 23
- 24 CHAYTOR, O.C.:
- Q. Ended up receiving the note? 25

Daga 207	T =
Page 297	Page 299
1 MS. HENNESSEY:	1 conversation?
2 A. Yes.	2 MS. HENNESSEY:
3 CHAYTOR, Q.C.:	3 A. I justI guess I was trying to recall the
4 Q. With the word "greatly" removed?	4 discussions that I had had with you and Mr.
5 MS. HENNESSEY:	5 Coffey and I wanted to be sure that I was
6 A. Yes.	6 providing accurate information to you.
7 CHAYTOR, Q.C.:	7 CHAYTOR, Q.C.:
8 Q. And if we can go back then please to 0125,	8 Q. And did you have occasion to discuss the issue
9 page 33? And the final version then, this is	9 with Ms. McCormack?
the final version that ends up going to those	10 MS. HENNESSEY:
individuals at Cabinet Secretariat and the	11 A. I didn't have a detailedI have spoken to Ms.
Premier's office.	McCormack, but I haven't spoken around that
13 MS. HENNESSEY:	detail.
14 A. Yes.	14 CHAYTOR, Q.C.:
15 CHAYTOR, Q.C.:	15 Q. Have you spoken to Ms. McCormack to understand
16 Q. "Eastern Health advises 22 women were impacted	whether or not she has any recollection of
by the change in status of the ER/PR receptor	such a conversation?
tests" and so the word "greatly" is removed in	18 MS. HENNESSEY:
19 that?	19 A. Sorry?
20 MS. HENNESSEY:	20 CHAYTOR, Q.C.:
21 A. Yes.	21 Q. Have you asked Ms. McCormack whether she
22 CHAYTOR, Q.C.:	recalls the conversation that you're telling
23 Q. In that version, and you're saying that came	us took place August 18th?
24 about as a result of a subsequent conversation	24 MS. HENNESSEY:
25 that you had with Ms. McCormack?	25 A. No, I didn't ask her specifically about that
Page 298	Page 300
1 MS. HENNESSEY:	1 conversation.
	1 Conversation.
12 A Vec	2 CHAVTOR O.C.
2 A. Yes.	2 CHAYTOR, Q.C.: 3 O No and I'm not asking if you asked her
3 CHAYTOR, Q.C.:	3 Q. No, and I'm not asking if you asked her
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with	 Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack?	 Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue
 3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 	 Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it?	 Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.:	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th?
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes.	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? 9 MS. HENNESSEY:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY:	3 Q. No, and I'm not asking if you asked her 4 specifically. I'm wondering whether or not 5 you and Ms. McCormack have discussed the issue 6 of your conversation on August 18th? Did you 7 have any discussion with Ms. McCormack 8 regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her.
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 MS. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 MS. HENNESSEY: 11 A. I remembered it after we met in 12 January/February.	3 Q. No, and I'm not asking if you asked her 4 specifically. I'm wondering whether or not 5 you and Ms. McCormack have discussed the issue 6 of your conversation on August 18th? Did you 7 have any discussion with Ms. McCormack 8 regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss?
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.:	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss? 13 MS. HENNESSEY:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 MS. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 MS. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year.	3 Q. No, and I'm not asking if you asked her 4 specifically. I'm wondering whether or not 5 you and Ms. McCormack have discussed the issue 6 of your conversation on August 18th? Did you 7 have any discussion with Ms. McCormack 8 regarding your discussion of August 18th? 9 Ms. Hennessey: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss? 13 Ms. Hennessey: 14 A. It was around the use of the word "greatly"
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 MS. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 MS. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 MS. HENNESSEY:	3 Q. No, and I'm not asking if you asked her 4 specifically. I'm wondering whether or not 5 you and Ms. McCormack have discussed the issue 6 of your conversation on August 18th? Did you 7 have any discussion with Ms. McCormack 8 regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss? 13 MS. HENNESSEY: 14 A. It was around the use of the word "greatly" 15 CHAYTOR, Q.C.:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes.	3 Q. No, and I'm not asking if you asked her 4 specifically. I'm wondering whether or not 5 you and Ms. McCormack have discussed the issue 6 of your conversation on August 18th? Did you 7 have any discussion with Ms. McCormack 8 regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss? 13 MS. HENNESSEY: 14 A. It was around the use of the word "greatly" 15 CHAYTOR, Q.C.: 16 Q. And what did you discuss?
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 MS. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 MS. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 MS. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.:	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. Hennessey: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. Hennessey: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. Hennessey: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time?	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't a focused discussion on it.
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 MS. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 MS. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 MS. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time? 20 MS. HENNESSEY:	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't a focused discussion on it. CHAYTOR, Q.C.:
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time? 20 Ms. HENNESSEY: 21 A. At that point in time, I didn't recall it, and	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't a focused discussion on it. CHAYTOR, Q.C.: When did this conversation take place?
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time? 20 Ms. HENNESSEY: 21 A. At that point in time, I didn't recall it, and 22 that's why I felt it was important that I	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't a focused discussion on it. CHAYTOR, Q.C.: Q. When did this conversation take place?
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time? 20 Ms. HENNESSEY: 21 A. At that point in time, I didn't recall it, and 22 that's why I felt it was important that I 23 clarify the information I had shared with you.	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? 9 MS. HENNESSEY: 10 A. I did have a very brief discussion with her. 11 CHAYTOR, Q.C.: 12 Q. Okay, and what did you discuss? 13 MS. HENNESSEY: 14 A. It was around the use of the word "greatly" 15 CHAYTOR, Q.C.: 16 Q. And what did you discuss? 17 MS. HENNESSEY: 18 A. I don't recall the specifics of it. It wasn't 19 a focused discussion on it. 20 CHAYTOR, Q.C.: 21 Q. When did this conversation take place? 22 MS. HENNESSEY: 23 A. I don't recall exactly. It would have been
3 CHAYTOR, Q.C.: 4 Q. When did you remember that conversation with 5 Ms. McCormack? 6 Ms. HENNESSEY: 7 A. When did I remember it? 8 CHAYTOR, Q.C.: 9 Q. Yes. 10 Ms. HENNESSEY: 11 A. I remembered it after we met in 12 January/February. 13 CHAYTOR, Q.C.: 14 Q. So you met with us in February of this year. 15 Ms. HENNESSEY: 16 A. Yes. 17 CHAYTOR, Q.C.: 18 Q. And you had no recollection of that 19 conversation at that point in time? 20 Ms. HENNESSEY: 21 A. At that point in time, I didn't recall it, and 22 that's why I felt it was important that I	Q. No, and I'm not asking if you asked her specifically. I'm wondering whether or not you and Ms. McCormack have discussed the issue of your conversation on August 18th? Did you have any discussion with Ms. McCormack regarding your discussion of August 18th? MS. HENNESSEY: A. I did have a very brief discussion with her. CHAYTOR, Q.C.: Q. Okay, and what did you discuss? MS. HENNESSEY: A. It was around the use of the word "greatly" CHAYTOR, Q.C.: Q. And what did you discuss? MS. HENNESSEY: A. I don't recall the specifics of it. It wasn't a focused discussion on it. CHAYTOR, Q.C.: Q. When did this conversation take place?

May	7 27	, 2008 Multi	-Pa	age TM	Inquiry on Hormone Receptor Testing
		Page 301			Page 303
1	Q.	Sometime since February of this year?	1	(conversation with her about the subject?
2 M	IS. HI	ENNESSEY:	2	MS. HEN	NNESSEY:
3	A.	Yeah.	3	Α.	Yes, I did remember that before my
4 C	HAY'	TOR, Q.C.:	4	C	conversation.
5	Q.	And Mr. Thompson has told the Commissioner	5	THE CO	MMISSIONER:
6		that he's had discussions with both you and	6	Q. \$	So before your conversation with Ms.
7		Ms. McCormack.	7	1	McCormack, you at least remembered that you
8 M	IS. HI	ENNESSEY:	8	1	had discussed the question of whether greatly
9	A.	Yes.	9	5	should stay in?
10 CI	HAY'	TOR, Q.C.:	10	MS. HEN	NNESSEY:
11	Q.	Do you recall having a discussion with Mr.	11	Α.	Yes, I did.
12		Thompson around this issue, around the issue	12	THE CO	MMISSIONER:
13		of the August 18th briefing note?	13	Q. (Okay, and what was it again that triggered
14 M	IS. HI	ENNESSEY:	14	t	that memory? I didn't quite understand that.

16

17

18

19

20

22

2

8

14

22

A. A recent discussion with Mr. Thompson, I -15

16 CHAYTOR, Q.C.:

17 Q. Any discussion with Mr. Thompson around the

August 18th briefing note. 18

19 MS. HENNESSEY:

20 A. I think I'd had a discussion a number of

21 months ago.

22 CHAYTOR, Q.C.:

23 O. Around this note?

24 MS. HENNESSEY:

25 A. Yes.

25 THE COMMISSIONER: Page 304 Page 302

1 CHAYTOR, Q.C.: 2

Q. And did those discussions assist in your

3 ability to recall your conversations with Ms.

4 McCormack or your recollection in general

around this briefing note? 5

6 MS. HENNESSEY:

8

7 A. No, I tell you what made me recall it was that

I was trying to remember when this note was

9 done and I don't--I couldn't remember any

10 disagreement with respect to what was in the

11 final note.

12 CHAYTOR, Q.C.:

13 Q. I'm sorry?

14 MS. HENNESSEY:

15 A. I was trying to recall--I couldn't remember

there being any disagreement with respect--16

17 although I hadn't signed off on the note, I

18 couldn't remember any disagreement on what was

19 in the final note.

20 THE COMMISSIONER:

21 Q. I'm sorry, I don't think I'm understanding

22 correctly. Let's try it from this angle. Had

23 you remembered that you had a conversation

24 with Ms. McCormack about the subject of 25 greatly going in or out prior to your

Q. - you said something about you hadn't 1

A. I was trying to do the best I could to

remember whether I had accurately provided

I came through the earlier discussions on this

information to Mr. Coffey and Ms. Chaytor when

remembered that there was any -

3 MS. HENNESSEY:

15 MS. HENNESSEY:

file.

21 THE COMMISSIONER:

23 MS. HENNESSEY:

Q. Yes, and -

A. There was a -

A. I didn't remember there being any disagreement

in the content. 5

6 THE COMMISSIONER:

7 Q. Okay, yes, and what triggered the idea that

there was? Did you go back and pull the file,

9 for example, and look at the notes or did it

10 just pop in your head one day when you were

11 walking the dog or whatever?

12 MS. HENNESSEY:

A. Commissioner, that's pretty well what 13

happened. I wasn't walking the dog, but there

was a couple of points during my initial 15

meetings with the counsel that became clearer 16

17 to me after that discussion.

18 THE COMMISSIONER:

19 Q. After the discussion with counsel?

20 MS. HENNESSEY:

21 A. Yes, and I was trying to do the best I could

to provide accurate information to counsel.

23 CHAYTOR, Q.C.:

24 Q. And now Ms. Hennessey, your recollection is 25 such that you also remember the changing of a

	i-rage inquiry on from one Receptor resting
Page 305	Page 307
spelling error in the word "law suit"?	1 COMMISSIONER:
2 MS. HENNESSEY:	2 Q. She didn't recall the 18th conversation?
3 A. Yes, I did.	3 MS. HENNESSEY:
4 CHAYTOR, Q.C.:	4 A. She didn't recall anything around the word
5 Q. Ms. Hennessey, Ms. McCormack we've spoken	5 "greatly".
6 with, and she did not, when we spoke with her,	6 COMMISSIONER:
7 have a recollection of the conversation. Does	7 Q. Okay.
8 Ms. McCormack now recall the conversation?	8 CHAYTOR, Q.C.:
9 MS. HENNESSEY:	9 Q. Okay. Now, Ms. Hennessey, we saw at, if we
10 A. I wouldn't know.	could have 0192, page 6 back, please? This is
11 CHAYTOR, Q.C.:	your e-mail to Ms. Humphries August 18th?
12 Q. In your discussions with her, did you ask her	12 MS. HENNESSEY:
"do you recall our conversation on August 18th	13 A. Yes.
in which we made those two changes?"	14 CHAYTOR, Q.C.:
15 MS. HENNESSEY:	Q. Asking her to replace the August 17th version?
16 A. No, I didn't ask her a specific question.	16 MS. HENNESSEY:
17 CHAYTOR, Q.C.:	17 A. Yes.
18 Q. And I know, you know -	18 CHAYTOR, Q.C.:
19 MS. HENNESSEY:	19 Q. And in Eastern's directory and replace it with
20 A. I'm trying to do my best to -	20 this version. And this version says, "Eastern
21 CHAYTOR, Q.C.:	Health advises 22 women were greatly impacted
22 Q did you have that discussion with her -	by the change in status." And this is the
23 MS. HENNESSEY:	version that you asked Ms. Humphries to put in
24 A to answer your questions as honestly as I	Eastern's directory within the department, and
25 can.	it has the word "greatly" in it?
Page 306	Page 308
Page 306	Page 308 1 MS. HENNESSEY:
1 CHAYTOR, Q.C.:	1 MS. HENNESSEY:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this	MS. HENNESSEY: A. Can you just go back to the e-mail because I
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not?	 1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think -
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls -	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely.
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER:	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel,	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a -
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel,	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms.
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy?
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation?	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes.
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief.	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER:	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms.
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that,	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does 19 or does not remember the conversation or does	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits 19 to this note when you're ready to deal with
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does 19 or does not remember the conversation or does 20 or does not remember anything about it	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits 19 to this note when you're ready to deal with 20 this request."
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does 19 or does not remember the conversation or does 20 or does not remember anything about it 21 greatly?	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits 19 to this note when you're ready to deal with 20 this request." 21 MS. HENNESSEY:
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does 19 or does not remember the conversation or does 20 or does not remember anything about it 21 greatly? 22 MS. HENNESSEY:	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits 19 to this note when you're ready to deal with 20 this request." 21 MS. HENNESSEY: 22 A. Right.
1 CHAYTOR, Q.C.: 2 Q. So you don't know if she recalls this 3 conversation or not? 4 MS. HENNESSEY: 5 A. No, I don't know whether she recalls - 6 COMMISSIONER: 7 Q. But you doI'm sorry, once again I'm 8 confused, I guess. I thought you said that you 9 have, since your conversation with counsel, 10 had a conversation with Ms. McCormack in which 11 you, to some extent anyway, referenced this 12 August 18th conversation? 13 MS. HENNESSEY: 14 A. Yes, and it was very brief. 15 COMMISSIONER: 16 Q. Okay. Well, what can you tell us about that, 17 is there something in the context of that 18 which would indicate either Ms. McCormack does 19 or does not remember the conversation or does 20 or does not remember anything about it 21 greatly? 22 MS. HENNESSEY: 23 A. There wasn't anything in my discussion with	1 MS. HENNESSEY: 2 A. Can you just go back to the e-mail because I 3 think - 4 CHAYTOR, Q.C.: 5 Q. Absolutely. 6 MS. HENNESSEY: 7 A there was a - 8 CHAYTOR, Q.C.: 9 Q. Here's the e-mail. And you can scroll down 10 there, too, if you wish. And this is Ms. 11 McCormack sending you the final copy? 12 MS. HENNESSEY: 13 A. Right, yes. 14 CHAYTOR, Q.C.: 15 Q. And you've asked her, you've asked Ms. 16 Humphries then, "Please replace the note you 17 put in Eastern's directory yesterday with this 18 version. We need to discuss two small edits 19 to this note when you're ready to deal with 20 this request." 21 MS. HENNESSEY: 22 A. Right. 23 CHAYTOR, Q.C.:

May 27, 2008	Multi-Page Inquiry on Hormone Receptor Testing
Pa	ge 309 Page 311
1 MS. HENNESSEY:	1 MS. HENNESSEY:
2 A. Yes, and there was two edits to that version.	2 A. Yes, yeah, that's it.
3 CHAYTOR, Q.C.:	3 CHAYTOR, Q.C.:
4 Q. And so those two edits were what?	4 Q. And that's the detail that you went through in
5 MS. HENNESSEY:	5 editing this briefing note? You actually
6 A. Were we removed the wordI removed the wor	
7 "greatly" from and theit was a misspelling	7 MS. HENNESSEY:
8 of the word lawsuit or suit or something like	8 A. Yes, I did. Yeah, I do recall that.
9 that. That was the two edits.	9 CHAYTOR, Q.C.:
10 CHAYTOR, Q.C.:	10 Q. And this piece here, the reasons for the
11 Q. And so, Ms. Hennessey, which version of this	erroneous results and steps take to prevent
note exists in Eastern's directory within the	12 recurrence.
department?	13 MS. HENNESSEY:
14 MS. HENNESSEY:	14 A. Yeah.
15 A. In the department the version that exists is	15 CHAYTOR, Q.C.:
the one without "greatly" in it.	16 Q. Which you felt contained inaccurate
17 CHAYTOR, Q.C.:	information?
	18 MS. HENNESSEY:
1	
not what we would find in the department's	8
20 directory?	20 CHAYTOR, Q.C.: 21 Q. That went, that went ahead and was forwarded
21 MS. HENNESSEY:	
22 A. Pardon?	22 without any change or revision?
23 CHAYTOR, Q.C.:	23 MS. HENNESSEY:
Q. This is not the version? It's this version	24 A. Yes, unfortunately that's what happened.
25 with those two changes?	25 CHAYTOR, Q.C.:
Pa	ge 310 Page 312
1 MS. HENNESSEY:	1 Q. And, Ms. Hennessey, I want to be clear now,
2 A. Yes, the version that exists in my director is	2 the note left the department?
the one without the word "greatly".	3 MS. HENNESSEY:
4 CHAYTOR, Q.C.:	4 A. Yes.
5 Q. And a change in the word "lawsuit", is that	5 CHAYTOR, Q.C.:
6 right?	6 Q. Without your approval?
7 MS. HENNESSEY:	7 MS. HENNESSEY:
8 A. Yes.	8 A. Well, the note didn't leave the department,
9 CHAYTOR, Q.C.:	9 the note was being drafted at cabinet
10 Q. Do you recall where that is in this?	10 secretariat.
11 MS. HENNESSEY:	11 CHAYTOR, Q.C.:
12 A. Yes, I can tell you where it is.	12 Q. And the note was going to go forward?
13 CHAYTOR, Q.C.:	13 MS. HENNESSEY:
14 Q. Is it under this section here?	14 A. Yes.
15 MS. HENNESSEY:	15 CHAYTOR, Q.C.:
16 A. I think -	16 Q. Without your approval?
17 CHAYTOR, Q.C.:	17 MS. HENNESSEY:
18 Q. See lawsuit?	18 A. Yes. My last conversation with Ms. McCormack
19 MS. HENNESSEY:	I indicated to her that I wasn't able to
20 A. No, it's in a version that where it looks like	approve the note.
21 it's crooked.	21 CHAYTOR, Q.C.:
22 CHAYTOR, Q.C.:	22 Q. Okay. Did you ask her to remove your name
Q. Is it here? We see the word "lawsuit" here a	
well. "The suite" right here I take it, "the	24 MS. HENNESSEY:
25 suite"?	25 A. No, I didn't ask her to remove the name.

1VIay 21, 2000 1VIu	ini-i age inquiry on Hormone Receptor Testing
Page 31	Page 315
1 CHAYTOR, Q.C.:	1 A. No, I don't.
2 Q. Why not?	2 CHAYTOR, Q.C.:
3 MS. HENNESSEY:	3 Q. Why couldn't it wait until Mr. Abbott or the
4 A. I guess that was just, I guess, what I live	4 minister were back to approve of the note?
5 with in working in the system, right. That's	5 MS. HENNESSEY:
6 notI mean, there are other notes that have	6 A. I'm not able to answer that question. I mean,
7 approved by Moira Hennessey on them which, you	7 the note was drafted by cabinet secretariat
8 know, move forward without my final approval.	and it was their decision when the note was
9 And this note was not in my control, the note	9 circulated internally.
was in the control of the cabinet secretariat.	10 CHAYTOR, Q.C.:
11 CHAYTOR, Q.C.:	11 Q. And did you feel that thereyou did feel,
12 Q. So the note went without you being comfortable	though, there was a sense of urgency around
in giving it approval?	this?
14 MS. HENNESSEY:	14 MS. HENNESSEY:
15 A. Yeah.	15 A. I did because my first involvement in the note
16 CHAYTOR, Q.C.:	was around the 7th or 8th of August that the
17 Q. Without Mr. Abbott signing off on it?	you know, I was delayed putting attention to
18 MS. HENNESSEY:	it. I didn't have any staff available to
19 A. Yes.	assist me who were familiar with the file. I
20 CHAYTOR, Q.C.:	was working on Corner Brook long-term care,
21 Q. Because you never heard back from Mr. Abbott	work for a cabinet presentation on the 17th.
22 on it?	I got the information from Heather Predham on
23 MS. HENNESSEY:	Friday afternoon. I did my best on Sunday
24 A. No.	24 morning to move the information into a table.
25 CHAYTOR, Q.C.:	The table was typed on Monday. I was busy all
Page 31	Page 316
1 Q. And to your knowledge did the minister know	day Monday with respect to Corner Brook long-
about even the existence of this note?	term care. I took the information home that
3 MS. HENNESSEY:	3 evening and reviewed it. I left the following
4 A. To the best of my knowledge the minister	4 morning to go to Labrador. I was in Labrador
5 didn't see the note.	on the 15th and 16th. On the 17th theI went
6 CHAYTOR, Q.C.:	down to see the deputy minister about the
7 Q. Now, Ms. Hennessey, this had been, according	7 note, that he was in the cabinet presentation
8 to any of records that we have here, this had	at the time. I went back the second time and
9 been the first request by cabinet secretariat	9 he wasn't back to his office, so I sent the
for a new note since the October, 2005?	note to him electronically.
11 MS. HENNESSEY:	11 CHAYTOR, Q.C.:
12 A. Yes.	12 Q. Okay. And why is it that you went to see him,
13 CHAYTOR, Q.C.:	why did you go to see him personally on the
14 Q. Okay. When the story first broke in the	14 note?
media.	15 MS. HENNESSEY:
16 MS. HENNESSEY:	16 A. I went down with the hopes of seeing him
17 A. Yeah.	because I had the information on the test
18 CHAYTOR, Q.C.:	results from Eastern Health.
19 Q. What was the urgency in sending this note?	19 CHAYTOR, Q.C.:
20 MS. HENNESSEY:	20 Q. And that was new information in your
21 A. There was some urgency at cabinet secretariat.	21 department, wasn't it?
22 I -	22 MS. HENNESSEY:
23 CHAYTOR, Q.C.:	23 A. Yes, it was. But I wasn't able to see him.
24 Q. And do you know what that was?	24 CHAYTOR, Q.C.:
25 MS. HENNESSEY:	25 Q. And I guess you felt that the deputy minister
1 - Carrier II I I I I I I I I I I I I I I I I I	2. This I goess you felt that the deputy infinitely

would be interested in that information?

2 MS. HENNESSEY:

A. Yes, I would think so.

4 CHAYTOR, Q.C.:

Q. And the minister would be interested in that 5

information?

7 MS. HENNESSEY:

A. Yes.

9 CHAYTOR, Q.C.:

Q. Was the minister's briefing note updated to 10

reflect this information? 11

12 MS. HENNESSEY:

A. Sorry, the minister's briefing -

14 CHAYTOR, Q.C.:

Q. Yes, the last briefing note for the minister 15

16 is in May?

17 MS. HENNESSEY:

A. Yes.

19 CHAYTOR, O.C.:

Q. So now we have a lot more information with all 20

21 the numbers.

22 MS. HENNESSEY:

A. Right, yeah.

24 CHAYTOR, Q.C.:

1

Q. Was his briefing note updated to reflect this 25

new information?

Page 318

2 MS. HENNESSEY: A. I understood that the purpose of this note was

to, for one of two things, was for the--it was 4

5 a note for the premier for discussion with the minister or it was a note that would have been 6

7 discussed during the premier's update at

cabinet. 8

9 CHAYTOR, Q.C.:

Q. Okay. I'm sorry, you understood it was for a 10

11 note for -

12 MS. HENNESSEY:

A. I understood -13

14 CHAYTOR, Q.C.:

Q. - the premier to discuss with the minister?

16 MS. HENNESSEY:

17 A. Yes, I understood that the note was prepared

for a discussion with the minister or that it 18

would have been discussed during the premier's 19

20 update at cabinet.

21 CHAYTOR, Q.C.:

Q. And who told you that, who told you that was 22

the purpose for this briefing note? 23

24 MS. HENNESSEY:

A. That was my understanding. I didn't learn

until much later that that may not necessarily

2 have been the case.

3 CHAYTOR, Q.C.:

Q. Right. But who told you that?

5 MS. HENNESSEY:

A. That, I guess as long as I've been doing 6

notes, notes that I've done for the premier, I 7

8 always understood, rightly or wrongly, that

the notes are done for a discussion with the 9

minister of the portfolio. 10

11 CHAYTOR, Q.C.:

Q. So I take it the minister's briefing note 12

wasn't updated to include the numbers? 13

14 MS. HENNESSEY:

A. No. 15

16 CHAYTOR, Q.C.:

Q. Okay. And even though these are the first 17

time the numbers are provided to the 18

19 department?

20 MS. HENNESSEY:

21 A. Yeah.

22 CHAYTOR, Q.C.:

Q. The briefing note, however, is kept in Eastern 23

Health's directory within the department?

25 MS. HENNESSEY:

Page 320

Well, within the board services

A. Yes. 2 division.

1

3 CHAYTOR, Q.C.:

Q. Yes. And was a copy given to the minister?

5 MS. HENNESSEY:

A. I did not -6

7 CHAYTOR, Q.C.:

Q. Copy of the briefing?

9 MS. HENNESSEY:

A. - give a copy to the minister.

11 CHAYTOR, Q.C.:

Q. Do you know if anybody gave a copy to the 12

13 minister?

14 MS. HENNESSEY:

A. I'm not aware of anybody giving a copy to the 15

minister. 16

17 CHAYTOR, Q.C.:

Q. And is, the purpose is for the premier to have 18

a discussion with the minister?

20 MS. HENNESSEY:

A. Yes.

19

22 CHAYTOR, Q.C.:

Q. Wouldn't the minister need a copy of the 23

briefing note? 24

25 MS. HENNESSEY:

Q. And what happened in that meeting with the

A. In the meeting with the premier Mr. Abbott

Q. And did you acknowledge that you had not

discussion with Mr. Abbott. When we met with

the premier, Mr. Abbott did the talking with

Q. Okay. And what else happened in that meeting?

shared the final version with Mr. Abbott?

A. Ms. Chaytor, I don't recall having that

acknowledged that he hadn't shared the note

Page 323

Page 324

2

5

6

12

13

15

16

17

18

20

premier?

with the minister.

A. That he had not, yeah.

O. That he had not?

the premier.

3 MS. HENNESSEY:

7 COMMISSIONER:

9 MS. HENNESSEY:

11 CHAYTOR, Q.C.:

14 MS. HENNESSEY:

19 CHAYTOR, Q.C.:

21 MS. HENNESSEY:

23 CHAYTOR, Q.C.:

Q. Yes.

Page 321

- A. The note went, the draft note went to the 1
- 2 deputy minister. The final note, if I recall
- correctly, did not get sent down to the deputy 3
- minister. 4
- 5 CHAYTOR, Q.C.:
- Q. Did the final version of the note go to the 6
- deputy minister? 7
- 8 MS. HENNESSEY:
- A. No, I don't recall sending the final version 9
- to the deputy minister. 10
- 11 CHAYTOR, Q.C.:
- Q. And why not, Ms. Hennessey? 12
- 13 MS. HENNESSEY:
- 14 A. I understood that the note, you know, was for
- the discussion with the--between the minister 15
- and the premier. The following week, I guess 16
- again it was oversight on my part, that the 17
- following week I became engaged in other files 18
- 19 and did not forward the final note to the
- deputy minister. 20
- 21 CHAYTOR, Q.C.:
- 22 Q. When did you realize that the minister was not
- aware of the existence of this note? 23
- 24 MS. HENNESSEY:
- 25 A. I learned that the minister wasn't aware of
- 25 MS. HENNESSEY:
 - A. It was very short meeting, that was the 1

A. With the meeting with the premier?

- 2 discussion.
- 3 CHAYTOR, Q.C.:
 - Q. Okay. And was the premier upset by this?
 - 5 MS. HENNESSEY:
 - A. The premier wasn't pleased.
 - 7 CHAYTOR, Q.C.:
 - Q. Were you aware prior to August 18th, 2006 that 8
 - Minister Osborne was concerned that briefing 9
 - notes were leaving the department without his 10
 - 11 knowledge?
 - 12 MS. HENNESSEY:

14

22

- 13 A. Yes. I was aware that Minister Osborne wanted
 - to see briefing notes before they left the
- department. 15
- 16 CHAYTOR, O.C.:
- 17 Q. And would you have understood that that would
- include a briefing note such as the August 18
- 18th briefing note? 19
- 20 MS. HENNESSEY:
- 21 A. Well, this particular note wasn't--I sent the
 - draft note to the deputy minister. The--I
- didn't feel that I had control over this note 23
- 24 because it was being prepared at cabinet 25
 - secretariat.

- Page 322
- the note in May, 2007. 1
- 2 CHAYTOR, Q.C.:
- Q. And how did you become aware of that?
- 4 MS. HENNESSEY:
- A. I had a call from the clerk of the executive 5
- council, who was Mr. Thompson at the time. 6
- 7 CHAYTOR, Q.C.:
- Q. And what was discussed between yourself and 8
- Mr. Thompson at that time?
- 10 MS. HENNESSEY:
- 11 A. Mr. Thompson asked me had I seen the August
- 18th briefing note and I told him that I had 12
- and that I had forwarded the, certainly the 13
- August 17th note to the deputy minister. 14
- 15 CHAYTOR, Q.C.:
- Q. And was there any other discussion around this 16
- 17 note at that time?
- 18 MS. HENNESSEY:
- 19 A. With Mr. Thompson?
- 20 CHAYTOR, O.C.:
- 21 o. Yes.
- 22 MS. HENNESSEY:
- A. No, not with Mr. Thompson. Later that day Mr. 23
- Abbott and I were called to see the premier. 24
- 25 CHAYTOR, Q.C.:

Page 325 1 CHAYTOR, Q.C: 2 Q. But you would have understood that Minister 3 Osborne would have wanted to see the August 4 18th briting note? 5 MS. HENNESSEY: 5 MS. BENNESSEY: 6 A. Yes, 1 sear, 1 did send the draft note to the 6 deputy minister and the final note, based on 8 my recall, did not get sent. 9 CHAYTOR, Q.C: 10 Q. Other than your e-mail that you received from 11 MS. Perdham, Healther Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 MS. HENNESSEY: 16 Q. Other than your e-mail that you received from 15 A. Trecall any subsequent discussions with Ms. 18 Predham eround this note? 19 CHAYTOR, Q.C: 10 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the Information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note 26 was—that there was a note required in central 27 government and that they were looking for test 28 results. 29 (And did Ms. Predham indicate that she would have to check with anyone else within Eastern 7 Health prior to providing you with that information and that Dr. Williams wasn't as information and that Dr. Williams wasn't as information and that Dr. Williams wasn't as available at that time. 3 concern about who the information may be forwarded to? 3 y Ms. HENNESSEY: 4 (HAYTOR, Q.C: 3 Q. And was there any caveat put on the provision of the information as to who it could be information to me. 10 but you know, acknowl		i ruge inquiry on from one receptor resums
2 D. But you would have understood that Minister 3 OSborne would have understood that Minister 4 IBth briefing note? 5 MS. HENNESSEY: 5 NS. HENNESSEY: 5 OS Did you ever hear that Eastern Health were of 6 the understanding that briefing notes could be 7 proceed from disclosure if they go directly 8 to Cabinet? 9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 MS. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 MS. HENNESSEY: 16 to provide me with the information. I don't recall any subsequent discussions with Ms. 19 Predham on it. 19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would have to check with anyone clse within Eastern 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would have to check with anyone clse within Eastern 4 Health were of 4 the moterstanding that briefing notes could be protected from 4 they you ever heard of that notion, that 1 briefing notes could be protected from 4 they you did shear? 4 they you dever heard of that notion, that 1 briefing notes could be protected from 4 they you did shear? 4 they you dever heard of that notion, that 2 briefing notes could be protected from 4 they you did shear? 4 they you dever heard of that notion, that 3 briefing notes could be protected from 4 they you did shear? 5 Ms. HENNESSEY: 5 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central 2 government and that they were looking for test 3 results. 5 Q. Are you were heard of that notion, that 1 briefing notes could be protected from 4 they you developed that? 5 Ms. HEN	Page 325	Page 327
3 Osborne would have wanted to see the August 4 18th briefing note? 5 Ms. Hishnisses: 6 A. Yes, I sent, I did send the draft note to the 7 deputy minister and the final note, based on 8 my recall, did not get sent. 9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HENNESSEY: 15 A. I recall speaking to Ms. Predham, asking her 16 to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 10 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information? 23 Ns. HENNESSEY: 24 A. I indicated to her, as I recall, that the note 25 how the information would be used or who would 26 receive the information? 27 A. I indicated to her, as I recall, that the note 28 Ns. HENNESSEY: 29 A. I indicated to her, as I recall, that the note 20 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 26 Q. And was there any caveat put on the provision of the information as to who it could be for our available at that time. 27 (HAYTOR, Q.C.) 28 Q. Are you ever heard an of that notion, that briefing notes could be protected from disclosure if they go directly to Cabinet? 15 Ms. HENNESSEY: 16 A. No. IFMS HENNESSEY: 17 (A. Would Eastern Health have been aware of that? 18 Ms. HENNESSEY: 29 A. Tindicated to her, as I recall, that the note 20 A. No. IFM I that the accommunicated that to - 21 (A. May you ever heard an oft that notion, that briefing notes could be protected from disclosure if they go directly to Cabinet? 29 (A. Would Eastern Health have power heard of that notion, that briefing notes could be protected from disclosure of the yound from the notion of the information of the provision of the information to me, but the formation of the infor	1 CHAYTOR, Q.C.:	1 A. I think Ms. Predham would have been aware that
4 IRIN briefing none? 5 MS. HENNESSEY: 5 Q. Did you ever hear that Eastern Health were of the understanding that briefing notes could be protected from disclosure if they go directly to Cabiner? 9 MS. HENNESSEY: 10 Q. Other than your e-mail that you received from 1 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 MS. HENNESSEY: 16 A. Sorry, did I hear? 17 CHAYTOR, Q.C. 18 WS. HENNESSEY: 18 Predham on it. 19 CHAYTOR, Q.C. 19 Q. Mad when you asked Ms. Predham for the 16 information, did she express any concern as to 16 A. Would Eastern Health have been aware of that? 17 CHAYTOR, Q.C. 18 Q. Are you aware of that? 18 WS. HENNESSEY: 19 A. Sorry, was there? 19 MS. HENNESSEY: 29 MS. HENNESSEY: 21 A. I indicated to her, as I recall, that the note 22 CHAYTOR, Q.C. 23 Q. Have you ever heard a notion along those lines 24 Eastern Health around that particular point. 25 CHAYTOR, Q.C. 26 Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern 7 Health prior to providing you with that information and that Dr. Williams wasn't 28 available at that time. 29 MS. HENNESSEY: 20 CHAYTOR, Q.C. 20 Ms where any caveat put on the provision of the information as to who it could be 17 forwarded to? 20 Ms. HENNESSEY: 20 CHAYTOR, Q.C. 20 And that same paragraph appears there. 22 MS. HENNESSEY: 20 CHAYTOR, Q.C. 20 Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 Q. Have you ever heard of that notion, that is briefing notes could be protected from 14 disclosure if they go directly to Cabiner? 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 Q. Are you aware of that? 29 MS. HEN	2 Q. But you would have understood that Minister	2 the note was being done for the Premier's
5 MS. HENNESSEY: 5 Q. Did you ever hear that Eastern Health were of the understanding that briefing notes could be protected from disclosure if they go directly to Cabinet? 10 A. Sorry, did I hear? 11 CHAYTOR, Q.C. 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HENNESSEY: 15 A. I recall speaking to Ms. Predham, asking her to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C. 19 Ms. HENNESSEY: 16 A. Would Eastern Health have been aware of that? 17 CHAYTOR, Q.C. 18 Q. Are you aware of that? 17 CHAYTOR, Q.C. 18 Q. Are you aware of that? 17 CHAYTOR, Q.C. 18 Q. Are you aware of that? 19 Ms. HENNESSEY: 19 Ms. HENNESSEY: 24 CHAYTOR, Q.C. 25 Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health were of the understanding that briefing notes could be protected from disclosure if they go directly to Cabinet? 10 A. Sorry, did I hear? 11 CHAYTOR, Q.C. 12 Q. Have you ever heard of that notion, that briefing notes could be protected from disclosure if they go directly to Cabinet? 13 CHAYTOR, Q.C. 15 Q. And did Ms. Predham for the information of the information with that information and that they were looking for test information and that they were looking for test information and that Dr. Williams wasn't a wailable at that time. 14 Leave you ever heard of that notion, that briefing notes could be protected from disclosure if they go directly to Cabinet? 13 CHAYTOR, Q.C. 15 Q. And did Ms. Predham indicate that she would have to check with anyone else of who would receive the information and that they were looking for test information. I do did Ms. Predham indicate that she would have to check with anyone else within Eastern Health round that particular point. 25 Ms. HENNESSEY: 25 Ms. HENNESSEY: 26 L'HAYTOR, Q.	3 Osborne would have wanted to see the August	3 office.
6 A. Yes, I sent, I did send the draft note to the 7 deptry minister and the final note, based on 8 my recall, did not get sent. 9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HENNISSEY: 16 to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 19 CHAYTOR, Q.C.: 20 Q. And when you saked Ms. Predham for the 21 information, did she express any concern as to 22 how the information? 24 Ms. HENNISSEY: 25 A. I indicated to her, as I recall, that the note 26 was—that there was a note required in central 27 government and that they were looking for test 28 information? 29 Ms. HENNISSEY: 21 A. I don't recall being in any discussion with 29 G. And did Ms. Predham indicate that she would 30 have to check with anyone else within Eastern 41 Health prior to providing you with that 31 information and that Dr. Williams wasn't 32 available at that time. 32 available at that time. 33 my the minimum of the information at the world of the information at the world of the information at the time. 44 CHAYTOR, Q.C.: 45 Q. And was there any caveat put on the provision of the information at to who it could be for forwarded to? 45 Ms. HENNIESSEY: 46 CHAYTOR, Q.C.: 47 CHAYTOR, Q.C.: 48 Ms. HENNIESSEY: 49 Ms. HENNIESSEY: 40 A. Sorry, was there? 40 L'HAYTOR, Q.C.: 41 CHAYTOR, Q.C.: 42 CHAYTOR, Q.C.: 43 Ms. HENNIESSEY: 44 CHAYTOR, Q.C.: 45 CHAYTOR, Q.C.: 46 CHAYTOR, Q.C.: 47 CHAYTOR, Q.C.: 48 CHAYTOR, Q.C.: 49 CHAYTOR, Q.C.: 40 And dive could go, please, to P-0192 page 5? 40 And this is the version of August 17th which you've indicated was sent to Mr. Abbott. 41 Ms. HENNIESSEY: 42 CHAYTOR, Q.C.: 43 CHAYTOR, Q.C.: 44 CHAYTOR, Q.C.: 45 CHAYTOR, Q.C.: 46 CHAYTOR, Q.C.: 47 CHAYTOR, Q.C.: 48 CHAYTOR, Q.C.: 49 CHAYTOR, Q.C.: 40 CHAYTOR, Q.C.: 41 CHAYTOR, Q.C.: 41 CHAYTOR, Q.C.: 41 CHAYTOR, Q.C.: 42 CHAYTOR, Q.C.: 43 CHAYTOR, Q.C.	4 18th briefing note?	4 CHAYTOR, Q.C.:
deputy minister and the final note, based on my recall, did not get sent. 9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 Ms. Prodham. Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HINNESSEY: 15 A. I recall speaking to Ms. Predham, asking her to to provide me with the information. I don't recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 10 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information? 24 Ms. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anytone else within Eastern 7 Health prior to providing you with that information? 9 Ms. HENNESSEY: 22 (HAYTOR, Q.C.: 23 Q. Have you ever heard of that notion, that briefing notes could be protected from disclosure if they go directly to A. Sorry, doc. 11 CHAYTOR, Q.C.: 13 Driefing notes could be protected from disclosure of they go directly to A. Sorry, doc. 12 Ox Mas there with soil by Ms. HENNESSEY: 15 A. I recall speaking to Ms. Predham on this, did you receive the information and would be used or who would to receive the information and that they were looking for test results. 4 CHAYTOR, Q.C.: 24 Ms. HENNESSEY: 25 Ms. HENNESSEY: 26 Q. And did Ms. Predham indicate that she would have to check with anytone else within Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 CHAYTOR, Q.C.: 4 CHAYTOR, Q.C.: 5 Ms. HENNESSEY: 9 A. Sorry, was there? 10 Q. Was there any caveat put on the provision of the information as to who it could be forwarded to? 11 Oxidate the provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well a	5 MS. HENNESSEY:	5 Q. Did you ever hear that Eastern Health were of
8 my recall, did not get sent. 9 CHAYTOR, Q.C: 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HINNISSEY: 15 A. I recall speaking to Ms. Predham, asking her 16 to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C: 20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information? 23 receive the information? 24 Ms. HINNISSEY: 25 A. I indicated to her, as I recall, that the note 26 Page 328 1 wasthat there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anytone else within Eastern 7 Health prior to providing you with that 8 information? 9 Ms. HENNESSEY: 10 A. Mo. IT not really aware of it, so I wouldn't 2 Eastern Health? 2 Eastern Health? 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C: 4 Q. If we could just go back, please, to P-0192- 5 [I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C: 15 Q. And was there any caveat put on the 16 information as to who it could be 17 forwarded to? 18 O. A Ms. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 MS. HENNESSEY: 26 A. I indicated that the outer of the advantable for an 16 A. MS. Predham provided for information to me, 17 but, you know, acknowledging that it was draft information. 29 A. No. I'm not really aware of it, so I wouldn't 20 Eastern Health,	6 A. Yes, I sent, I did send the draft note to the	6 the understanding that briefing notes could be
9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HENNESSEY: 15 A. I recall speaking to Ms. Predham, asking her 16 to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information of the information of the than the would have to check with anyone else within Eastern 4 CHAYTOR, Q.C.: 4 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that information at that Dr. Williams wasn't available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the portion of the information as to who it could be forwarded to? 16 A. Ms. Predham provided the information may be forwarded to? 17 A. Sorry, did I hear? 18 CHAYTOR, Q.C.: 18 D. Have you ever heard of that notion, that disclosure if they go directly to Cabinet? 15 Ms. HENNESSEY: 16 A. I recall speaking to Ms. Predham of the information. I don't recall bear that? 16 A. Ms. Prodham proteid in central government and that they were looking for test information? 18 Ms. HENNESSEY: 29 Ms. HENNESSEY: 20 CHAYTOR, Q.C.: 31 Q. Have you ever heard of that notion, that disclosure if they go directly to Cabinet? 32 Ms. HENNESSEY: 32 Ms. HENNESSEY: 33 A. I not reall bear an orion along those lines expressed by Eastern Health are one of that? 34 Ms. HENNESSEY: 35 Ms. HENNESSEY: 36 Ms. HENNESSEY: 37 A. I don't recall being in any discussion with go and that provided for information in me, the provided for information in me, the provided for information in me, the provided for information in the provision of the information at the provision of the information at the provided for information at the provided for informatio	7 deputy minister and the final note, based on	7 protected from disclosure if they go directly
9 CHAYTOR, Q.C.: 10 Q. Other than your e-mail that you received from 11 Ms. Predham, Heather Predham on this, did you 12 also have telephone discussions with Ms. 13 Predham around this note? 14 Ms. HENNESSEY: 15 A. I recall speaking to Ms. Predham, asking her 16 to provide me with the information. I don't 17 recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information of the information of the than the would have to check with anyone else within Eastern 4 CHAYTOR, Q.C.: 4 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that information at that Dr. Williams wasn't available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the portion of the information as to who it could be forwarded to? 16 A. Ms. Predham provided the information may be forwarded to? 17 A. Sorry, did I hear? 18 CHAYTOR, Q.C.: 18 D. Have you ever heard of that notion, that disclosure if they go directly to Cabinet? 15 Ms. HENNESSEY: 16 A. I recall speaking to Ms. Predham of the information. I don't recall bear that? 16 A. Ms. Prodham proteid in central government and that they were looking for test information? 18 Ms. HENNESSEY: 29 Ms. HENNESSEY: 20 CHAYTOR, Q.C.: 31 Q. Have you ever heard of that notion, that disclosure if they go directly to Cabinet? 32 Ms. HENNESSEY: 32 Ms. HENNESSEY: 33 A. I not reall bear an orion along those lines expressed by Eastern Health are one of that? 34 Ms. HENNESSEY: 35 Ms. HENNESSEY: 36 Ms. HENNESSEY: 37 A. I don't recall being in any discussion with go and that provided for information in me, the provided for information in me, the provided for information in me, the provided for information in the provision of the information at the provision of the information at the provided for information at the provided for informatio	8 my recall, did not get sent.	8 to Cabinet?
II Ms. Predham, Heather Predham on this, did you also have telephone discussions with Ms. IP Predham around this note? IA Ms. HENNESSEY: IS A. I recall speaking to Ms. Predham, asking her to to provide me with the information. I don't recall any subsequent discussions with Ms. IR Predham on it. IF CHAYTOR, Q.C.: IR Q. And when you asked Ms. Predham for the information, did she express any concern as to be how the information would be used or who would receive the information? IF Wass—that there was a note required in central government and that they were looking for test as information? Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. HENNESSEY: A. I rindicated to her, as I recall, that the note Page 326 I was—that there was a note required in central government and that they were looking for test as results. A. CHAYTOR, Q.C.: J. Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. A. Ms. HENNESSEY: A. Grid Mas Ms. HENNESSEY: A. Grid Ms. HENNESSEY:	1	9 MS. HENNESSEY:
II Ms. Predham, Heather Predham on this, did you also have telephone discussions with Ms. IP Predham around this note? IA Ms. HENNESSEY: IS A. I recall speaking to Ms. Predham, asking her to to provide me with the information. I don't recall any subsequent discussions with Ms. IR Predham on it. IF CHAYTOR, Q.C.: IR Q. And when you asked Ms. Predham for the information, did she express any concern as to be how the information would be used or who would receive the information? IF Wass—that there was a note required in central government and that they were looking for test as information? Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. HENNESSEY: A. I rindicated to her, as I recall, that the note Page 326 I was—that there was a note required in central government and that they were looking for test as results. A. CHAYTOR, Q.C.: J. Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. A. Ms. HENNESSEY: A. Grid Mas Ms. HENNESSEY: A. Grid Ms. HENNESSEY:	Q. Other than your e-mail that you received from	10 A. Sorry, did I hear?
13 Brecham around this note? 14 MS. HENNESSEY: 15 MS. HENNESSEY: 15 MS. HENNESSEY: 16 LAYTOR, Q.C. 17 CHAYTOR, Q.C. 18 CHAYTOR, Q.C. 19 CHAYTOR, Q.C. 19 MS. HENNESSEY: 10 A. I don't recall there was a note required in central 2 government and that they were looking for test 3 results. 16 A. Would Eastern Health have been aware of that? 17 CHAYTOR, Q.C. 19 MS. HENNESSEY: 20 A. No, I'm not really aware of it, so I wouldn't have communicated that to - 22 CHAYTOR, Q.C. 20 CHAYTOR, Q.C. 21 Q. And when you asked Ms. Predham for the 22 information would be used or who would 23 receive the information? 22 CHAYTOR, Q.C. 23 Q. Have you ever heard a notion along those lines 24 CHAYTOR, Q.C. 24 Q. Have you ever heard a notion along those lines 25 MS. HENNESSEY: 25 MS. HENNESSEY: 26 A. I indicated to her, as I recall, that the note 25 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 27 Q. And didd Ms. Predham indicate that she would 28 have to check with anyone else within Eastern 39 MS. HENNESSEY: 28 MS. HENNESSEY: 29 A. Ms. Predham provided the information to me, 29 b. Ms. HENNESSEY: 29 A. Ms. HENNESSEY: 29 A. Ms. HENNESSEY: 29 A. May as there any caveat put on the 29 GHAYTOR, Q.C. 20 CHAYTOR, Q.C. 21 Q. Was there any condition put on the 29 information, did Ms. Predham express any 20 CHAYTOR, Q.C. 20 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C. 24 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 27 Q. And that same paragraph appears there. 28 MS. HENNESSEY: 28 MS. HENNESSEY: 29 A. Yes. 29 A. A. Right. 2		11 CHAYTOR, Q.C.:
13 Brecham around this note? 14 MS. HENNESSEY: 15 MS. HENNESSEY: 15 MS. HENNESSEY: 16 LAYTOR, Q.C. 17 CHAYTOR, Q.C. 18 CHAYTOR, Q.C. 19 CHAYTOR, Q.C. 19 MS. HENNESSEY: 10 A. I don't recall there was a note required in central 2 government and that they were looking for test 3 results. 16 A. Would Eastern Health have been aware of that? 17 CHAYTOR, Q.C. 19 MS. HENNESSEY: 20 A. No, I'm not really aware of it, so I wouldn't have communicated that to - 22 CHAYTOR, Q.C. 20 CHAYTOR, Q.C. 21 Q. And when you asked Ms. Predham for the 22 information would be used or who would 23 receive the information? 22 CHAYTOR, Q.C. 23 Q. Have you ever heard a notion along those lines 24 CHAYTOR, Q.C. 24 Q. Have you ever heard a notion along those lines 25 MS. HENNESSEY: 25 MS. HENNESSEY: 26 A. I indicated to her, as I recall, that the note 25 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 27 Q. And didd Ms. Predham indicate that she would 28 have to check with anyone else within Eastern 39 MS. HENNESSEY: 28 MS. HENNESSEY: 29 A. Ms. Predham provided the information to me, 29 b. Ms. HENNESSEY: 29 A. Ms. HENNESSEY: 29 A. Ms. HENNESSEY: 29 A. May as there any caveat put on the 29 GHAYTOR, Q.C. 20 CHAYTOR, Q.C. 21 Q. Was there any condition put on the 29 information, did Ms. Predham express any 20 CHAYTOR, Q.C. 20 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C. 24 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 26 CHAYTOR, Q.C. 27 Q. And that same paragraph appears there. 28 MS. HENNESSEY: 28 MS. HENNESSEY: 29 A. Yes. 29 A. A. Right. 2	also have telephone discussions with Ms.	12 Q. Have you ever heard of that notion, that
14 disclosure if they go directly to Cabinet? 15	_	
15 A. I recall speaking to Ms. Predham, asking her to provide me with the information. I don't recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the information, did she express any concern as to how the information would be used or who would receive the information? 24 Ms. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central government and that they were looking for test results. 2 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information and that Dr. Williams wasn't available at that time. 4 CHAYTOR, Q.C.: 10 Q. And was there any caveat put on the provision of the information as to who it could be for forwarded to? 2 Ms. HENNESSEY: 2 Ms. HENNESSEY: 2 Ms. HENNESSEY: 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 2 Ms. HENNESSEY: 4 Q. Have you ever heard a notion along those lines expressed by Eastern Health? 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 2 Ms. HENNESSEY: 4 Q. Have you ever heard a notion along those lines expressed by Eastern Health? 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 2 Ms. HENNESSEY: 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 2 Ms. HENNESSEY: 4 Q. And was there any caveat put on the provision of the information as to who it could be for forwarded to? 4 Q. And was there any condition put on the information, did Ms. Predham express any concern about who the information may be concern about who	14 MS. HENNESSEY:	
16 to provide me with the information. I don't recall any subsequent discussions with Ms. 18 Predham on it. 19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the information would be used or who would receive the information would be used or who would receive the information or would be used or who would receive the information or would the used or who would receive the information or would the used or who would receive the information or would the used or who would receive the information or was—that there was a note required in central government and that they were looking for test are results. 4 CHAYTOR, Q.C.: 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? 9 MS. HENNESSEY: 10 A. Ms. Predham of the 22 Have you aware of that? 11 A. I don't recall being in any discussion with 22 Eastern Health around that particular point. 21 CHAYTOR, Q.C.: 3 Q. Have you ever heard a notion along those lines expressed by Eastern Health? 22 CHAYTOR, Q.C.: 3 Q. Have you ever heard a notion along those lines expressed by Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192— 5 ["m sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. 8 Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." 21 MS. HENNESSEY: 4 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192— 5 ["m sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. 8 Should the Premier require further detail, officials from Eastern Health, average with the information and that Dr. Williams wasn't a svaliable at that time. 4 CHAYTOR, Q.C.: 4 Q. And was there any caveat put on the provision of the information as to who it could be information	15 A. I recall speaking to Ms. Predham, asking her	
17 recall any subsequent discussions with Ms. 18 Predham on it. 18 Q. Are you aware of that? 19 MS. HENNESSEY: 20 Q. And when you asked Ms. Predham for the information, did she express any concern as to how the information would be used or who would 22 how the information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 Page 326 Page 328 Page 328 Page 328 Page 328 Pag		16 A. Would Eastern Health have been aware of that?
18 Predham on it. 19 CHAYTOR, Q.C.: 19 MS. HENNESSEY: 10 MS. HENNESSEY: 1		
19 CHAYTOR, Q.C.: 20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 MS. HENNESSEY: 24 MS. HENNESSEY: 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 21 MS. HENNESSEY: 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 MS. HENNESSEY: 24 MS. HENNESSEY: 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 MS. HENNESSEY: 24 MS. HENNESSEY: 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 20 MS. HENNESSEY: 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 MS. HENNESSEY: 24 MS. HENNESSEY: 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 29 MS. HENNESSEY: 20 MS. HENNESSEY: 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 MS. HENNESSEY: 24 MS. HENNESSEY: 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 29 MS. H	1	18 Q. Are you aware of that?
20 Q. And when you asked Ms. Predham for the 21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 21 information, did Ms. Predham express any 22 concern about who the information may be 23 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.: 25 MS. HENNESSEY: 26 A. I indicated to her, as I recall, that the note 27 Ms. HENNESSEY: 28 A. I indicated to her, as I recall, that the note 29 And did Ms. Predham indicate that she would 40 A. No, I'm not really aware of it, so I wouldn't 41 have communicated that to - 42 CHAYTOR, Q.C.: 41 A. I don't recall being in any discussion with 42 Eastern Health around that particular point. 42 CHAYTOR, Q.C.: 43 CHAYTOR, Q.C.: 44 CHAYTOR, Q.C.: 45 CHAYTOR, Q.C.: 46 Q. If we could just go back, please, to P-0192- 47 For 10 For 20 Jona 3 And under 48 CHAYTOR, Q.C.: 49 Q. If we could just go back, please, to P-0192- 49 Tim sorry, it's P-0125, page 33. And under 49 Tim sorry, it's P-0125, page 33. And under 40 Tim sorry, it's P-0125, page 33. And under 41 A. I don't recall being in any discussion with 42 Eastern Health around that proving to Fage 32 Tim sorry, it's P-0125, page 33. And under 42 CHAYTOR, Q.C.: 43 A. Ms. HENNESSEY: 44 CHAYTOR, Q.C.: 45 CHAYTOR, Q.C.:	19 CHAYTOR, Q.C.:	
21 information, did she express any concern as to 22 how the information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 wasthat there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 c. Have you ever heard a notion along those lines 24 expressed by Eastern Health? 25 MS. HENNESSEY: 4 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 [I'm sorry, it's P-0125, page 33. And under 4 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 the receive function of information of the information as to who it could be 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 MS. HENNESSEY: 26 CHAYTOR, Q.C.: 27 Q. And that same paragraph appears there. 28 MS. HENNESSEY: 29 A. I don't recal	20 Q. And when you asked Ms. Predham for the	20 A. No, I'm not really aware of it, so I wouldn't
22 how the information would be used or who would 23 receive the information? 24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 wasthat there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information may be 24 forwarded to? 25 MS. HENNESSEY: 26 MS. HENNESSEY: 27 MS. HENNESSEY: 28 MS. HENNESSEY: 29 CHAYTOR, Q.C.: 30 Q. Have you ever heard a notion along those lines 29 expressed by Eastern Health? 20 Eastern Health around that particular point. 31 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 [Pim sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 MS. HENNESSEY: 26 CHAYTOR, Q.C.: 27 Q. And that same paragraph appears there. 28 MS. HENNESSEY: 29 A. Right. 20 CHAYTOR, Q.C.: 30 CHAYTOR, Q.C.: 40 If we could just go back, please, to		•
24 MS. HENNESSEY: 25 A. I indicated to her, as I recall, that the note Page 326 1 was—that there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 cexpressed by Eastern Health? 25 MS. HENNESSEY: 1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192—5 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 MS. HENNESSEY: 26 CHAYTOR, Q.C.: 27 Q. Was there any condition put on the 28 information and that Dr. Williams wasn't and the provision of August 17th which and the pr		22 CHAYTOR, Q.C.:
Page 326 Page 326 Page 328	23 receive the information?	23 Q. Have you ever heard a notion along those lines
Page 326 Page 326 Page 328	24 MS. HENNESSEY:	24 expressed by Eastern Health?
1 wasthat there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 2 I. A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192- 17 in sorry, it's P-0125, page 33. And under 18 A. Tdoin Required" it says "This notice 19 A. Stoin Required" it says "This notice 19 A. Should the Premier require further detail, 29 officials from Eastern Health, as well as 20 their legal counsel will be available for an 21 and that premier require further detail, 29 officials from Eastern Health, as well as 20 their legal counsel will be available for an 21 and their legal counsel will be available for an 22 And this is the version of August 17th which 23 you've indicated was sent to Mr. Abbott. 24 (CHAYTOR, Q.C.: 25 Q. And that same paragraph appears there. 26 CHAYTOR, Q.C.: 27 Q. Was there any condition put on the 28 A. Right. 29 And that particular point. 30 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192-page 35. 16 A. Hennessey: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information did Ms. Predham express any 23 concern about who the information may be 24 CHAYTOR, Q.C.: 25 CHAYTOR, Q.C.: 26 CHAYTOR, Q.C.: 27 Q. And that same paragraph appears there. 28 Ms.	25 A. I indicated to her, as I recall, that the note	25 MS. HENNESSEY:
1 wasthat there was a note required in central 2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 2 I. A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192- 17 in sorry, it's P-0125, page 33. And under 18 A. Tdoin Required" it says "This notice 19 A. Stoin Required" it says "This notice 19 A. Should the Premier require further detail, 29 officials from Eastern Health, as well as 20 their legal counsel will be available for an 21 and that premier require further detail, 29 officials from Eastern Health, as well as 20 their legal counsel will be available for an 21 and their legal counsel will be available for an 22 And this is the version of August 17th which 23 you've indicated was sent to Mr. Abbott. 24 (CHAYTOR, Q.C.: 25 Q. And that same paragraph appears there. 26 CHAYTOR, Q.C.: 27 Q. Was there any condition put on the 28 A. Right. 29 And that particular point. 30 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192-page 35. 16 A. Hennessey: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information did Ms. Predham express any 23 concern about who the information may be 24 CHAYTOR, Q.C.: 25 CHAYTOR, Q.C.: 26 CHAYTOR, Q.C.: 27 Q. And that same paragraph appears there. 28 Ms.		
2 government and that they were looking for test 3 results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 17 m sorry, it's P-0125, page 33. And under 18 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 18 CHAYTOR Required it says "This notice 19 provided for information purposes only. 20 Should the Premier require further detail, 21 officials from Eastern Health, as well as 21 their legal counsel will be available for an 22 MS. HENNESSEY: 23 A. Yes. 24 CHAYTOR, Q.C.: 25 Q. And if we could go, please, to P-0192 page 5? 26 CHAYTOR, Q.C.: 27 Q. Was there any condition put on the 28 MS. HENNESSEY: 29 CHAYTOR, Q.C.: 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 CHAYTOR, Q.C.: 26 CHAYTOR, Q.C.: 27 Q. Was there any condition put on the 28 Information and that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192-page 3. And under 4 Q. If m sorry, it's P-0125, page 33. And under 4 Q. If we could just go back, please, to P-0192-page 3. And under 4 Q. If we could just go back, please, to P-0192-page 3. And this is the version of August 17th which 4 Q. HAYTOR, Q.C.: 4 Q. And if we could go, please, to P-019	Page 326	Page 328
results. 4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 24 CHAYTOR, Q.C.: 25 Q. And that same paragraph appears there. 26 MS. HENNESSEY: 27 A. Right. 28 CHAYTOR, Q.C.: 29 MS. HENNESSEY: 20 CHAYTOR, Q.C.: 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:		_
4 CHAYTOR, Q.C.: 5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 Ms. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 Ms. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information may be 24 forwarded to? 2 (H we could just go back, please, to P-0192 16 ("Action Required" it says "This notice provided for information purposes only. 8 Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." 12 Ms. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could just go back, please, to P-0192 16 ("Action Required" it says "This notice provided for information purposes only. 28 Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." 12 Ms. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which you've indicated was sent to Mr. Abbott. 18 Ms. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information may be 22 Ms. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.: 25 Ms. HENNESSEY: 26 A. Right. 27 Ms. HENNESSEY: 28 A. Right. 29 CHAYTOR, Q.C.: 29 CHAYTOR, Q.C.: 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information may be 22 Ms. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	1 wasthat there was a note required in central	1 A. I don't recall being in any discussion with
5 Q. And did Ms. Predham indicate that she would 6 have to check with anyone else within Eastern 7 Health prior to providing you with that 8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 Ms. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 10 detail, as well as 11 in-person briefing." 12 Ms. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 24 CHAYTOR, Q.C.: 25 Q. And that same paragraph appears there. 26 Ms. HENNESSEY: 27 Q. And that same paragraph appears there. 28 Ms. HENNESSEY: 29 A. Right. 20 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point.
have to check with anyone else within Eastern Health prior to providing you with that high information? MS. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft high information and that Dr. Williams wasn't MS. HENNESSEY: A. And was there any caveat put on the provision of the information as to who it could be forwarded to? A. Sorry, was there? CHAYTOR, Q.C.: A. Sorry, was there any condition put on the high information in to me, high but, you know, acknowledging that it was draft high information and that Dr. Williams wasn't high information in to me, high information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as heart legal counsel will be available for an high in-person briefing." MS. HENNESSEY: high information as to who it could be high information as to who it could be high information purposes only. MS. HENNESSEY: MS. HENNESSEY:	wasthat there was a note required in central government and that they were looking for test results.	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.:
Health prior to providing you with that sinformation? MS. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. Health prior to providing you with that sinformation? MS. HENNESSEY: M	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.:	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192
8 information? 9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 28 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 CHAYTOR, Q.C.: 25 MS. HENNESSEY: 26 CHAYTOR, Q.C.: 27 Q. And that same paragraph appears there. 28 MS. HENNESSEY: 29 A. Right. 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 21 MS. HENNESSEY: 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under
9 MS. HENNESSEY: 10 A. Ms. Predham provided the information to me, 11 but, you know, acknowledging that it was draft 12 information and that Dr. Williams wasn't 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 29 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 25 Officials from Eastern Health, as well as 16 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice
but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? 16 of the information as to who it could be forwarded to? 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be concerned to the information and in in-person briefing. 11 in-person briefing. 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which the volume and the version of August 17th which the version of August 17th which the version of August 17th which the version of August	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only.
but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. 13 available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? 16 of the information as to who it could be forwarded to? 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be concerned to the charges. 21 In the new could go, please, to P-0192 page 5? 22 And if we could go, please, to P-0192 page 5? 23 And this is the version of August 17th which the volume and the could go, please, to P-0192 page 5? 24 CHAYTOR, Q.C.: 25 Q. And if we could go, please, to P-0192 page 5? 26 And this is the version of August 17th which the volume and the could go, please, to P-0192 page 5?	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information?	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail,
information and that Dr. Williams wasn't available at that time. 14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? 16 And this is the version of August 17th which 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 19 A. Sorry, was there? 19 Q. Was there any condition put on the 19 information, did Ms. Predham express any 20 concern about who the information may be 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.: 25 MS. HENNESSEY: 26 And if we could go, please, to P-0192 page 5? 27 And this is the version of August 17th which 28 MS. HENNESSEY: 29 CHAYTOR, Q.C.: 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? MS. HENNESSEY:	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as
14 CHAYTOR, Q.C.: 15 Q. And was there any caveat put on the provision 16 of the information as to who it could be 17 forwarded to? 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.: 25 Q. And if we could go, please, to P-0192 page 5? 26 And this is the version of August 17th which 27 you've indicated was sent to Mr. Abbott. 28 MS. HENNESSEY: 29 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? MS. HENNESSEY: A. Ms. Predham provided the information to me,	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an
Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be forwarded to? 21 Q. And if we could go, please, to P-0192 page 5? 22 And this is the version of August 17th which you've indicated was sent to Mr. Abbott. 23 A. Yes. 24 CHAYTOR, Q.C.: 25 A. Right. 26 CHAYTOR, Q.C.: 27 A. Right. 28 A. Right. 29 CHAYTOR, Q.C.: 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing."
of the information as to who it could be forwarded to? MS. HENNESSEY: A. Sorry, was there? CHAYTOR, Q.C.: Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be forwarded to? And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: PA. Yes. CHAYTOR, Q.C.: Q. And that same paragraph appears there. MS. HENNESSEY: A. Yes. MS. HENNESSEY: A. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. And that same paragraph appears there. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. And this is the	wasthat there was a note required in central government and that they were looking for test results. 4 CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY:
forwarded to? 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 17 you've indicated was sent to Mr. Abbott. 18 MS. HENNESSEY: 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time.	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes.
18 MS. HENNESSEY: 19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 18 MS. HENNESSEY: 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time.	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.:
19 A. Sorry, was there? 20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 19 A. Yes. 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. 4 CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5?
20 CHAYTOR, Q.C.: 21 Q. Was there any condition put on the 22 information, did Ms. Predham express any 23 concern about who the information may be 24 forwarded to? 20 CHAYTOR, Q.C.: 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.: 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: And was there any caveat put on the provision of the information as to who it could be	1 A. I don't recall being in any discussion with 2 Eastern Health around that particular point. 3 CHAYTOR, Q.C.: 4 Q. If we could just go back, please, to P-0192 5 I'm sorry, it's P-0125, page 33. And under 6 "Action Required" it says "This notice 7 provided for information purposes only. 8 Should the Premier require further detail, 9 officials from Eastern Health, as well as 10 their legal counsel will be available for an 11 in-person briefing." 12 MS. HENNESSEY: 13 A. Yes. 14 CHAYTOR, Q.C.: 15 Q. And if we could go, please, to P-0192 page 5? 16 And this is the version of August 17th which
Q. Was there any condition put on the information may be forwarded to? Q. Was there any condition put on the information put on the 21 Q. And that same paragraph appears there. 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to?	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And if we could go, please, to P-0192 page 5? And this is the version of August 17th which you've indicated was sent to Mr. Abbott.
information, did Ms. Predham express any concern about who the information may be forwarded to? 22 MS. HENNESSEY: 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. 4 CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? MS. HENNESSEY:	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY:
concern about who the information may be 23 A. Right. 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? MS. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? MS. HENNESSEY: A. Sorry, was there?	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes.
24 forwarded to? 24 CHAYTOR, Q.C.:	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? Ms. HENNESSEY: A. Sorry, was there? CHAYTOR, Q.C.: Was there any condition put on the	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: A. Yes. CHAYTOR, Q.C.:
	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? Ms. HENNESSEY: A. Sorry, was there? CHAYTOR, Q.C.: Q. Was there any condition put on the information, did Ms. Predham express any	Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.:
25 MS. HENNESSEY: 25 Q. Where did that paragraph come from?	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? Ms. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? MS. HENNESSEY: A. Sorry, was there? CHAYTOR, Q.C.: Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: A. Yes. CHAYTOR, Q.C.: And that same paragraph appears there. MS. HENNESSEY: A. Yes. A. Yes. A. Yes. A. Yes.
	wasthat there was a note required in central government and that they were looking for test results. CHAYTOR, Q.C.: Q. And did Ms. Predham indicate that she would have to check with anyone else within Eastern Health prior to providing you with that information? MS. HENNESSEY: A. Ms. Predham provided the information to me, but, you know, acknowledging that it was draft information and that Dr. Williams wasn't available at that time. CHAYTOR, Q.C.: Q. And was there any caveat put on the provision of the information as to who it could be forwarded to? MS. HENNESSEY: A. Sorry, was there? CHAYTOR, Q.C.: Q. Was there any condition put on the information, did Ms. Predham express any concern about who the information may be forwarded to?	A. I don't recall being in any discussion with Eastern Health around that particular point. CHAYTOR, Q.C.: Q. If we could just go back, please, to P-0192 I'm sorry, it's P-0125, page 33. And under "Action Required" it says "This notice provided for information purposes only. Should the Premier require further detail, officials from Eastern Health, as well as their legal counsel will be available for an in-person briefing." MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: And if we could go, please, to P-0192 page 5? And this is the version of August 17th which you've indicated was sent to Mr. Abbott. MS. HENNESSEY: A. Yes. CHAYTOR, Q.C.: Q. And that same paragraph appears there. MS. HENNESSEY: A. Right. CHAYTOR, Q.C.:

May 27, 2008	Multi-Pa	inquiry on Hormone Receptor Testing
	Page 329	Page 331
1 MS. HENNESSEY:		Q. You said that you did have a discussion with
2 A. Ms. McCormack would have put that para		Ms. McCormack around that?
3 the briefing note.		MS. HENNESSEY:
4 CHAYTOR, Q.C.:	4	A. I had a brief discussion, it was August the
5 Q. Do you recall having any feedback from		18th. I think you need to remember that I was
6 Abbott regarding that paragraph?	6	trying to manage this note for a period of
7 MS. HENNESSEY:	7	time when I was actually in Labrador with the
8 A. No, I did not have any feedback from M		Minister.
9 Abbott on that.		CHAYTOR, Q.C.:
10 CHAYTOR, Q.C.:	10	Q. Yes. I understand and you recall your
11 Q. And if Mr. Abbott provided feedback on		discussion with her on August 18th?
note, would you expect that it would have		MS. HENNESSEY:
communicated through you?	13	A. Yes.
14 MS. HENNESSEY:		CHAYTOR, Q.C.:
15 A. If he provided feedback on this note, I wo		Q. About the word "greatly" and the two edits to
lf		the brief.
_		MS. HENNESSEY:
17 17th version that any feedback would have back to me.		A. Yes.
18 back to me. 19 CHAYTOR, Q.C.:	18	A. Tes. CHAYTOR, Q.C.:
_		-
20 Q. So if Mr. Abbott has told the Commission		Q. To the briefing note. The discussion,
21 that in fact this paragraph was his idea,	21	however, around this paragraph, what do you
22 you're not aware of that?	22	recall about that and what action happened
23 MS. HENNESSEY:	23	following that?
24 A. No, I'm not aware of that.		MS. HENNESSEY:
25 CHAYTOR, Q.C.:	25	A. I do recall a very brief discussion about
	Page 330	Page 332
1 Q. Ms. Hennessey, is there anything els		that, I don't recall all the details and I
2 reflection concerning this August		don't think that there was any action taken on
3 briefing note and its creation that you		it.
4 that you haven't told us or anything els		CHAYTOR, Q.C.:
5 you think we should know about this r	ote? 5	Q. And your best recollection on that is that you
6 MS. HENNESSEY:	6	pointed out to Ms. McCormack that you were of
7 A. I don't recall anything else, I tried t		the understanding the reports were back?
8 explain to you how this note was prep		MS. HENNESSEY:
9 what happened with the note. If I this		A. That the reports had been received.
anything else, I'll certainly let you kr	ow, 10	CHAYTOR, Q.C.:
but I don't recall anything else.	11	Q. And the recommendations were implemented.
12 CHAYTOR, Q.C.:		MS. HENNESSEY:
13 Q. Okay, thank you. That issue about 1		A. Yes.
discussed with Ms. McCormack the sta	atus of the 14	CHAYTOR, Q.C.:
15 reports -	15	Q. And what was Ms. McCormack's response to you
16 MS. HENNESSEY:	16	pointing that out to her?
17 A. Right.	17	MS. HENNESSEY:
18 CHAYTOR, Q.C.:	18	A. I don't recall specifically, Ms. Chaytor, at
19 Q. And pointing out to, well the paragra	ph is 19	this point in time. I do recall a very brief
right here on the screen, the reasons fo	r the 20	discussion that my understanding was different
21 erroneous results and steps taken to pr	revent 21	on this point.
22 reoccurrence.	22	CHAYTOR, Q.C.:
23 MS. HENNESSEY:	23	Q. So I take it she must have given you some
24 A. Right.	24	other understanding?
DE CHANTOR OC.		
25 CHAYTOR, Q.C.:	25	MS. HENNESSEY:

4

- A. Well what's written there is based on 1
- 2 information she would have gotten from Eastern
- Health. 3
- 4 CHAYTOR, Q.C.:
- Q. And I take it then she refused to change that 5
- portion of the note? 6
- 7 MS. HENNESSEY:
- 8 A. I don't think that we talked about refusing to
- change information. At that point in time the 9
- 10 note was ready to be circulated and that there
- was no further discussion on it. 11
- 12 CHAYTOR, O.C.:
- Ms. Hennessey, was it your 13 Q. Okay.
- understanding and I'm going to move on now 14
- from the August 18th note, was it your 15
- 16 understanding that Eastern Health was
- conducting a statistical analysis of the data 17
- from the ER/PR testing or retesting, I should 18
- 19 say?
- 20 MS. HENNESSEY:
- 21 A. I understood that there was a review of
- 22 statistics being done.
- 23 CHAYTOR, Q.C.:
- Q. And who told you that?
- 25 MS. HENNESSEY:

Page 334

- A. I believe that information would have come 1 from Heather Predham.
- 2 3 CHAYTOR, Q.C.:
- Q. And what is it that you understood that to
- mean, that there was a review of the 5
- statistics happening? 6
- 7 MS. HENNESSEY:
- A. I guess my understanding of a review of 8
- statistics would be that once the data was 9
- prepared, that they would do some analysis 10
- 11 around the information. Now whether my
- understanding and Ms. Predham's understanding 12
- 13 of a statistical review are the same, I
- wouldn't be able to comment. 14
- 15 CHAYTOR, O.C.:
- Q. And did waiting for that statistical analysis 16
- to take place in any way delay you from 17
- seeking information from Eastern Health 18
- regarding the retesting? 19
- 20 MS. HENNESSEY:

25

- 21 A. No, I understood that the statistical review
- 22 was being done that fall, that they were in
- the process of finalyzing the test results 23
- based on the--the tumor panel was, you know, 24
 - joined that spring, that the tumor panel was

meeting regularly to review the test results

Page 335

- 1 2 and to make contact with the patients and that
- once that review was finished, that a 3
 - statistical review or analysis was being done
- and that that was being done during the fall 5
- of--the fall of 2006, that that was being done 6
- and they were also rechecking to be sure that 7
- all the patients had been contacted. 8
- 9 CHAYTOR, O.C.:
- Q. So I take it it was something more, this 10
- statistical analysis was something more than 11
- just providing numbers as we see in August of 12
- 2006? 13
- 14 MS. HENNESSEY:
- A. That would be my understanding of a 15 16
 - statistical analysis.
- 17 CHAYTOR, Q.C.:

19

24

- Q. You were expecting more than that. And did 18
 - the department ever receive such analysis from
- Eastern Health? 20
- 21 MS. HENNESSEY:
- A. The next information that the department 22
- received with respect to the test results was, 23
 - as far as I know in the November 23rd meeting
- with the Minister. 25

Page 336

- 1 CHAYTOR, Q.C.:
 - Q. Right, the one-page briefing note, November
 - 23rd? 3
 - 4 MS. HENNESSEY:
 - A. The one-page listing of the test results.
 - 6 CHAYTOR, Q.C.:
 - Q. Right. And that, I take it too was not what
 - 8 you were expecting to receive.
 - 9 MS. HENNESSEY:
 - A. I would have viewed that as a reporting of 10
 - data, not a statistical analysis.
 - 12 CHAYTOR, Q.C.:

11

25

- Q. So, did -
- 14 MS. HENNESSEY:
- A. Now, I-
- 16 CHAYTOR, O.C.:
- 17 Q. - the department ever receive the statistical
- analysis that you were expecting? 18
- 19 MS. HENNESSEY:
- A. Um (phonetic) -
- 21 CHAYTOR, Q.C.:
- Q. If we could look at P-1477, please, page four 22
- and again this is typed version of notes we've 23
- received from Mr. Hynes concerning October 24
 - 20th, 2006 executive meeting.

May 27, 2008 M	ulti-Page [™] Inquiry on Hormone Receptor Testing
Page 3	
1 MS. HENNESSEY:	1 And briefing notes, circulation protocol.
2 A. Yes.	2 "Briefing notes for central agencies must be
3 CHAYTOR, Q.C.:	3 signed off by DM and Minister prior to being
4 Q. And indicated in his note is "ER/PR after a	4 sent." And I take it central agencies
5 year all patients still not notified." And do	5 includes Cabinet Secretariat?
6 you recall this discussion at the executive	6 MS. HENNESSEY:
7 meeting on October 20th, 2006?	7 A. Yes, it would.
8 MS. HENNESSEY:	8 CHAYTOR, Q.C.:
9 A. I don't recall that specific discussion, but I	9 Q. And how did this come to be discussed on
do know that Eastern Health was still checking	10 November 3rd, 2006?
at that point in time to ensure that all the	11 MS. HENNESSEY:
patients had been notified.	12 A. I seem to recall that there was a briefing
13 CHAYTOR, Q.C.:	note and another program area that went to
Q. And was this a concern within the department	central government without sign off.
that a year later all the patients hadn't been	15 CHAYTOR, Q.C.:
notified?	Q. Was there any discussion at this point in time
17 MS. HENNESSEY:	about the August 18th, 2006 note?
18 A. Yes, at that point in time it was a concern.	18 MS. HENNESSEY:
19 CHAYTOR, Q.C.:	19 A. No, there wasn't.
Q. And if we can look at P-0125, page 35, please?	20 CHAYTOR, Q.C.:
This is the October 24th, 2006 briefing note,	21 Q. Did it occur to you that the briefing note for
prepared by Ms. Griffiths and approved by you'	· ·
23 MS. HENNESSEY:	signed off by the DM and Minister?
24 A. Yes.	24 MS. HENNESSEY:
25 CHAYTOR, Q.C.:	25 A. I don't recall specifically this meeting of
Page 3	Page 340
1 Q. Okay, and this refers to, under "Current	1 November 2006.
2 Status: that Eastern had not public released	2 CHAYTOR, Q.C.:
3 the results of the retesting at this time,	3 Q. And if we could turn please to P-0125, page
4 except confidentially to individual patients.	4 37, and again Ms. Hennessey, this is a
5 The authority is currently reviewing all	5 briefing note, question and answer briefing
6 charts to ensure that all individuals have	6 note and it's drafted by Ms. Griffiths,
7 been contacted. The full review should be	7 approved by you.
8 completed by the end of November."	8 MS. HENNESSEY:
9 MS. HENNESSEY:	9 A. Right.
10 A. Yes.	10 CHAYTOR, Q.C.:
11 CHAYTOR, Q.C.:	11 Q. November 6th, 2006. And this indicates under
12 Q. So that was your understanding in terms of the	"Other suggested responses, the consultant's
status of patient contact at that point in	recommendations have been implemented. They
14 time?	return to Eastern Health in early April of
15 MS. HENNESSEY:	this year to assess the programs and were
16 A. Yes.	pleased that measures were put in place to
17 CHAYTOR, Q.C.:	17 address the concerns."
18 Q. And if we could have P-1450 please? This is a	18 MS. HENNESSEY:
meeting of your executive committee.	19 A. Right.
20 MS. HENNESSEY:	20 CHAYTOR, Q.C.:
20 MO. HENNESSEI.	20 CHATTOK, Q.C

21

22

23

24

concerns?

25 MS. HENNESSEY:

Q. Do you know where that information came from,

measures had been put in place to address the

that the consultants were pleased that

Q. And you are in attendance on this day, as is

Tansy Mundon and it's November 3rd, 2006,

Darrell Hynes and John Abbott are also there.

21

23

24

25

A. Yes.

22 CHAYTOR, Q.C.:

Page 341

- 1 A. I don't recall specifically, but I would think
- 2 that that came from information that was
- 3 gathered in preparing this briefing note.
- 4 CHAYTOR, Q.C.:
- 5 Q. And Ms. Hennessey, what's your next
- 6 involvement? This is now up to November 6th,
 - 2006, what's your next involvement on this
- 8 file?

7

- 9 MS. HENNESSEY:
- 10 A. I was not involved in the November 23rd
- meeting with the Minister, with Eastern
- 12 Health.
- 13 CHAYTOR, O.C.:
- 14 Q. And why is that, why didn't you attend that
- meeting?
- 16 MS. HENNESSEY:
- 17 A. I wasn't asked to attend the meeting and I
- 18 know at that point in time that I was busy,
- there was an issue with respect to pharmacists
- at Eastern Health and in other places in the
- province, but in particular at Eastern Health
- that Minister Osborne asked me to spend a fair
- 23 amount of time on.
- 24 CHAYTOR, Q.C.:
- 25 Q. And were you advised then following the

- 1 A. I seem to recall that it was the Minister's
- 2 policy advisor, Mr. Hynes.
- 3 CHAYTOR, Q.C.:
- 4 Q. And who was the oncologist?
- 5 MS. HENNESSEY:
- 6 A. I'm not sure if I knew at that time who the
- 7 oncologist was who was in the meeting.
- 8 CHAYTOR, Q.C.:
- 9 Q. And who relayed this information to you?
- 10 MS. HENNESSEY:
- 11 A. I seem to recall it was either--and it was
- just a passing comment, that it was either Mr.
- 13 Hynes or Ms. Mundon.
- 14 CHAYTOR, Q.C.:
- 15 Q. And so I take it Mr. Hynes and Ms. Mundon were
- both in the meeting?
- 17 MS. HENNESSEY:
- 18 A. Yes.
- 19 CHAYTOR, O.C.:
- 20 Q. And did they tell you about any other
- 21 discussion as to what information was provided
- 22 to the Minister? For example, did you receive
- 23 a copy of the November 23rd briefing note from
- 24 Eastern Health?
- 25 MS. HENNESSEY:

2

Page 342

- 1 meeting what was discussed?
- 2 MS. HENNESSEY:
- 3 A. I wasn't briefed by Mr. Abbott after the
- 4 meeting.
- 5 CHAYTOR, Q.C.:
- 6 Q. And did anyone tell you what had been
- 7 discussed in the meeting?
- 8 MS. HENNESSEY:
- 9 A. The only point that I can recall was that
- there was some heated discussion, I think,
- between an oncologist and the Minister's staff
- with respect to the deceased patients.
- 13 CHAYTOR, Q.C.:
- 14 Q. I'm sorry, heated discussion?
- 15 MS. HENNESSEY:
- 16 A. Discussion.
- 17 CHAYTOR, Q.C.:
- 18 Q. Between an oncologist?
- 19 MS. HENNESSEY:
- 20 A. Who was in the meeting and the Minister's
- 21 staff.
- 22 CHAYTOR, Q.C.:
- 23 Q. And who was the person from the Minister's
- 24 staff?
- 25 MS. HENNESSEY:

- 1 A. I did receive that table or the summary that
 - when we were preparing the November 27th
- 3 briefing note for the House of Assembly that
- 4 Mr. Abbott put that sheet of paper in my hand
- 5 and said "be sure that that gets attached to
- 6 the Minister's briefing note."
- 7 CHAYTOR, Q.C.:
- 8 Q. Okay, so Mr. Abbott gave that to you?
- 9 MS. HENNESSEY:
- 10 A. Yes.
- 11 CHAYTOR, Q.C.:
- 12 Q. Were there any discussions then--following the
- November 23rd meeting, were there any
- discussions in the department in terms of what
- would be disclosed by Eastern Health? Did you
- understand they were gearing up for a public
- disclosure on the issue?
- 18 MS. HENNESSEY:
- 19 A. I certainly understood that there would be a
- 20 public or a media briefing within a couple of
- 21 weeks.

25

- 22 CHAYTOR, Q.C.:
- 23 Q. Okay, and do you recall any discussions in the
- department as to why information would be
 - forthcoming through that briefing?

1 MS. HENNESSEY:

- A. No, I wasn't in any discussions in the
- department about what information would be 3
- disclosed in that briefing. 4
- 5 CHAYTOR, Q.C.:
- Q. Do you recall any discussion regarding 6
- disclosure of the total number of conversions 7
- 8 or an error rate, anything along those lines?
- 9 MS. HENNESSEY:
- A. I don't recall being in any discussion on it. 10
- 11 CHAYTOR, Q.C.:
- Q. Whether you took part in the discussion or 12
- not, do you recall hearing anything around the 13
- department about those issues? 14
- 15 MS. HENNESSEY:
- A. I don't recall hearing anything specifically. 16
- 17 CHAYTOR, Q.C.:
- Q. Anything at all, generally or otherwise?
- 19 MS. HENNESSEY:
- A. No, I wasn't briefed coming out -
- 21 CHAYTOR, Q.C.:
- 22 Q. No, I understand that.
- 23 MS. HENNESSEY:
- A. following that meeting and I don't recall 24
- being in any discussions with the Deputy 25

Page 346

- Minister or the Minister on what would be 1
- disclosed. 2
- 3 CHAYTOR, Q.C.:
- Q. And did you otherwise hear anything in the
- 5 department following that meeting about
- conversion rates, number of total changes with 6
- 7 changed results -
- 8 MS. HENNESSEY:
- 9 A. No, I wasn't at any discussion on the
- information that was in that November 23rd -10
- 11 CHAYTOR, O.C.:
- Q. And did you hear any discussion that others 12
- were partaking in around those issues? 13
- 14 MS. HENNESSEY:
- A. Any discussions within the department?
- 16 CHAYTOR, O.C.:
- 17 Q. Yes.
- 18 MS. HENNESSEY:
- A. I don't recall any details around that.
- 20 CHAYTOR, O.C.:
- Q. And what about then outside the department?
- 22 MS. HENNESSEY:
- A. I wasn't involved in any discussions with 23
- Eastern Health at that time. 24
- 25 CHAYTOR, Q.C.:

Page 345

- Q. Or anyone else outside the department.
- 2 MS. HENNESSEY:
- A. I wasn't involved in any discussions outside.
- 4 CHAYTOR, Q.C.:
- Q. And are you otherwise aware as to whether or 5
- not such discussions took place? 6
- 7 MS. HENNESSEY:
- A. I don't know.
- 9 CHAYTOR, Q.C.:
- Q. Okay, when Mr. Abbott gave you the briefing
- note from Eastern Health, the November 23rd 11
- 12 page, what did you do with it?
- 13 MS. HENNESSEY:
- 14 A. I attached it to the Minister's briefing note
- of November 27th. I can remember scanning the 15
 - information and thinking that it was not
- significantly different from the information 17
- of August, 2006. 18
- 19 CHAYTOR, O.C.:

16

- Q. So you looked at it enough to form the 20
- conclusion it wasn't a whole lot different 21
- 22 than what you had received three months
- 23 before?
- 24 MS. HENNESSEY:
- 25 A. Yeah, I didn't literally go back and get my

Page 348 sheet of paper and compare the two, but 1

- scanning it, I didn't see it as being
- 2
- significantly different. 3
- 4 CHAYTOR, Q.C.:
- Q. And were you surprised by that?
- 6 MS. HENNESSEY:
- 7 A. I don't know whether I reacted with surprise
- 8 to it.

11

22

- 9 CHAYTOR, Q.C.:
- Q. You were expecting that there was a 10
 - statistical analysis taking place, that was
- going to be happening in the fall? 12
- 13 MS. HENNESSEY:
- A. Yeah. 14
- 15 CHAYTOR, Q.C.:
- Q. So were you expecting it to be significantly 16
- different or something more than what had been 17
- provided earlier? 18
- 19 MS. HENNESSEY:
- A. Well the information, because I wasn't in the 20
- meeting, the information was provided in that 21
 - meeting and was accepted by the Deputy
- Minister and I just accepted the piece of 23
- paper from him and attached it to the note. 24
- 25 CHAYTOR, Q.C.:

7

Page 351

Page 349

- Q. Yes, and you looked at it enough, though, to 1
- 2 notice that the numbers were comparable to
- what had been provided three months before? 3
- 4 MS. HENNESSEY:
- A. Yeah, I mean I think there were some changes, 5
- but that they weren't significant. 6
- 7 CHAYTOR, O.C.:
- 8 Q. Ms. Hennessey, based on the information that
- you had, if the department wanted to calculate 9
- 10 at that point in time the total number of
- alive patients who had conversions, did the 11
- 12 department have the information to be able to
- do that? 13

16

- 14 MS. HENNESSEY:
- 15 A. Based on the information, based on that sheet
 - of paper, the data that had been provided by
- Eastern Health, I mean, I think from a pure 17
- mathematical you could do a calculation, but I 18
- 19 think there was a number of factors that, you
- know, came into consideration with respect to 20
- calculating an error rate and I think, you 21
- 22 know, the threshold for positive and negative
- had changed over time. 23
- 24 CHAYTOR, Q.C.:
- 25 Q. No, no, I didn't say error rate, I said number

Page 350

- of conversions, the number of people who had 1
- changed results. 2
- 3 MS. HENNESSEY:
- A. Well, you could take, for the patients who had
- 5 been retested, I would think that you could
- take the information and calculate the change 6
- 7 in the number of conversions.
- 8 CHAYTOR, O.C.:
- Q. And given that the numbers hadn't changed too 9
- much from August -10
- 11 MS. HENNESSEY:
- A. Right. 12
- 13 CHAYTOR, Q.C.:
- 14 Q. That exercise could have been completed in
- 15 August as well, with the numbers that were
- provided at that point in time? 16
- 17 MS. HENNESSEY:
- A. Yes, on a pure mathematical basis, a 18
- calculation could be done. 19
- 20 CHAYTOR, O.C.:
- 21 Q. As to how many patients had had a change in
- their results? 22
- 23 MS. HENNESSEY:
- A. Yes. 24
- 25 CHAYTOR, Q.C.:

Q. Yes, okay, and you say that there's a number

- 2 of factors that would come into play?
- 3 MS. HENNESSEY:
- A. Well, I think that was with respect to error, 4
- right, because there had been some--a change 5
- in the threshold with respect to positive and 6
 - negative, and some of it I don't understand,
- 8 you know. I know that--I don't know whether
- you would include the retro converters and I 9
- 10 don't know enough about that in the
- calculation or not. 11
- 12 CHAYTOR, Q.C.:
- Q. Okay, and this change in the threshold from 13
- positive to negative, did you have an 14
- impression as to how many people that would 15
- 16 have affected?
- 17 MS. HENNESSEY:
- A. No, I didn't.
- 19 CHAYTOR, O.C.:
- Q. Based on the numbers that were given 20
- 21 previously?
- 22 MS. HENNESSEY:
- A. No. 23
- 24 CHAYTOR, Q.C.:
 - Q. Would the number 13 stand out in your mind as

Page 352

- being probably 13 people? 1
 - 2 MS. HENNESSEY:
 - A. There's no particular number stands out in my 3
 - mind. If I looked at the sheet again now, you 4
 - 5 know, maybe I could determine that.
 - 6 CHAYTOR, Q.C.:
 - 7 Q. And where are you getting this understanding
 - if you were to look at an error rate that 8
 - these factors would have to be taken into 9
 - consideration? Where do you--what discussion 10
 - 11 did you take part in or overhear to know about
 - these things? 12
 - 13 MS. HENNESSEY:
 - 14 A. With respect to -
 - 15 CHAYTOR, Q.C.:
 - Q. Yes, the information that you were just giving 16
 - 17 us.
 - 18 THE COMMISSIONER:
 - Q. The change in the threshold.
 - 20 CHAYTOR, O.C.:
 - O. Yes, and the factors -
 - 22 MS. HENNESSEY:
 - A. Right, I mean -23
 - 24 THE COMMISSIONER:
 - Q. What makes you think that would have to be

May 27, 2008	Multi-Page TM	Inquiry on Hormone Receptor Testing
Pa	ge 353	Page 355
1 considered?	1 that	these were factors that were relevant in
2 MS. HENNESSEY:	2 deal	ing with an error rate.
3 A. The change in the threshold was identified i	a 3 MS. HENN	ESSEY:
4 many of our briefing notes with respect to a	4 A. Con	nmissioner, I don't recall. It may be that
5 one point the threshold was 30 percent and	l 5 it's	late in the day.
6 then it was, I think, changed to ten percent	6 THE COM	MISSIONER:
7 and then down to one percent.	7 Q. Wel	l, I suppose it'sreally the question is
8 CHAYTOR, Q.C.:	8 whe	ther or not that was something thatfor
9 Q. Yes, but the fact that those would be factors	9 exa	mple, if you have an interest in or have in
that would have to be taken into considerati	on 10 the	past dealt with error rates for something,
before you would look at calculating an erro	r 11 did	you, you know, at that time consider,
rate?	12 oka	y, how do you go about determining an error
13 MS. HENNESSEY:	13 rate	, and what you conclude and what you don't
14 A. Yeah, I wasn't in any discussion on that. I	14 -	
guess that's just, you know, a given that I	15 MS. HENN	ESSEY:
have a finance background, I would have lo	oked 16 A. Rig	ht, yeah.
at that. I don't recall, Ms. Chaytor, being	17 THE COMM	MISSIONER:
in any discussion in November 2006 on the	is 18 Q or	were you party to a conversation in which
19 file.		bebody might have raised, well, error rate
20 CHAYTOR, Q.C.:		omplicated here for these reasons, that
21 Q. At any point in time, I'm just wondering wh		of thing.
that information would come from, where		ESSEY:
would have understood that there would 1	` I	ay have been party to a discussion on that,
factors to come into play in calculating an	24 but	
error rate. I'm just wondering where you	25 THE COMM	MISSIONER:
Pa	ge 354	Page 356
1 would have gotten that information, and yo	·	you remember where that might have been and
2 also mentioned, for example, whether you v		might have been involved?
3 include the retro converters.	3 MS. HENNE	· ·
4 MS. HENNESSEY:	4 A. No,	I don't.
5 A. Well, I don't know much about the retro		
6 converters at all. I mean, with respect to		Predham (sic.), so the numbers were
7 the change in the threshold, I'm not sure if I		lable in the Department in August of 2006,
8 can explain it to you clearly.		ou certainly had seen numbers?
9 CHAYTOR, Q.C.:	9 MS. HENNE	-
10 Q. No, no, that's fine. I'm just wondering, you		
know, ifyou know, where you would get		
information.		then some changed numbers or slightly
13 MS. HENNESSEY:		nged numbers -
14 A. I mean, I think I would have heard reference		
to the threshold somewhere, you know, alo		
the way in this file, but to be able to tell	16 CHAYTOR,	
you exactly when I heard about it -		nparable numbers, I believe you said, in
18 THE COMMISSIONER:		ember of 2006, and in terms of figuring out
19 Q. I don't think the question was directed to		number of women who had or patients who
2. I don't difficulty quotient was directed to	20 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

23 MS. HENNESSEY:

in time?

had had changed results, that calculation

could have been made at either of those points

24 A. Right.

20

21

22

25 CHAYTOR, Q.C.:

converters or change in threshold.

20

21

23

25

22 MS. HENNESSEY:

A. Yes.

24 THE COMMISSIONER:

where you had heard about either retro

Q. Rather the question was what made you believe

1

5

16

Q. Do you know whether or not anyone in the 1

2 Department did that exercise?

3 MS. HENNESSEY:

A. I'm not aware that anybody in the Department

5 did that exercise.

6 CHAYTOR, Q.C.:

Q. Did you?

8 MS. HENNESSEY:

A. No, I didn't.

10 CHAYTOR, Q.C.:

11 Q. And why not?

12 MS. HENNESSEY:

A. I was reporting the information that had been

14 provided to me by Eastern Health. I did not

do any analysis on the data. 15

16 THE COMMISSIONER:

Q. Is that because you felt it wasn't part of 17

18 what you had to do or it was somebody else's

19 job or the Department didn't care or what?

20 MS. HENNESSEY:

21 A. I think it was the case, if I go back to

22 October 2005 when I was asked to accept the

information as provided by Eastern Health, 23

24 that's what I did.

25 THE COMMISSIONER:

Page 358

Q. So once again, you're only a conduit?

2 MS. HENNESSEY:

A. With respect -

4 THE COMMISSIONER:

Q. Just conveying information that's flowing 5

through you. You're not applying your mind -6

7 MS. HENNESSEY:

A. On that particular point, I did not spend any 8

time doing an analysis.

10 CHAYTOR, Q.C.:

11 Q. If we can look at -

12 THE COMMISSIONER:

13 Q. I'm sorry.

14 CHAYTOR, Q.C.:

O. Go ahead.

16 THE COMMISSIONER:

17 Q. But you seem to be a person who's quite

interested in precision and accuracy. 18

19 MS. HENNESSEY:

20 A. Right.

25

21 THE COMMISSIONER:

Q. You have cited a number of cases, perhaps with 22

one exception, but you've cited a number of 23

24 cases where you went back to people because of

what you saw as errors or imprecise statements

of information, which many other people might

2 have just let run by. And yet, you didn't

think to run any of the numbers on this. 3

4 MS. HENNESSEY:

A. I didn't run the numbers because, as I said to

you, based on my initial discussion with the 6

Deputy Minister on this file when he said to 7

8 accept the numbers as presented by Eastern

Health, that's what I did. I didn't do any 9

10 analysis on the data.

11 THE COMMISSIONER:

12 Q. Okay.

13 CHAYTOR, Q.C.:

14 Q. Now Ms. Hennessey, we are going to see though,

15 in a briefing note to come, that you do

calculate the positivity rate. You do

calculate it as being something other than the 17

18 27 percent.

19 MS. HENNESSEY: 20 A. Yes, I did in one note.

21 CHAYTOR, Q.C.:

22 Q. So you did do that at that point in time?

23 MS. HENNESSEY:

A. Yes, I did do that one calculation.

25 CHAYTOR, Q.C.:

Page 360

Page 359

Q. If we could look at P-0179 please? This is an 1 2

e-mail from yourself to Ms. Griffiths and this

3 is on the date that the Minister was being

briefed. 4

5 MS. HENNESSEY:

A. Yes. 6

11

13

14

15

19

21

22

7 CHAYTOR, Q.C.:

Q. November 23rd. And you're writing to Ms. 8

Griffiths to let her know that "the issue was 9

on CBC TV tonight." It's 7:21 at night. "You 10

may already be aware as well, George Tilley

met with the Minister today to provide an 12

update. We need to update the briefing note

tomorrow so it is ready for the House for

Monday. Can you please check with Tansy on

the key messages? Tansy was at the meeting 16

17 with Eastern and may have some suggested

changes. If you didn't see the news, you can 18

tell her what the headline is." And if we can

look, please at 0125, page 43? 20

This is a briefing note that's dated

November 27th 2006, prepared by Ms. Griffiths,

approved by yourself. So four days later we 23

have this briefing note. 24

25 MS. HENNESSEY:

1

A. Right.

- 2 CHAYTOR, Q.C.:
- Q. The issue is indicated to be "breast cancer 3
- survivors want answers about mistakes in 4
- 5 breast cancer screening tests." Did that
- catch your attention, Ms. Hennessey, that it's 6
- saying breast cancer screening tests? 7
- 8 MS. HENNESSEY:
- A. Yeah, I think that was what was being reported 9
- in the media at that time. 10
- 11 CHAYTOR, O.C.:
- Q. Okay, so this is not intended to be the issue 12
- as identified within the Department. This is 13
- 14 what the media is saying?
- 15 MS. HENNESSEY:
- A. Yes, that's what the media was saying. 16
- 17 CHAYTOR, Q.C.:
- 18 Q. But there was no indication here to say that
- 19 that's in error, that it's not breast cancer
- 20 screening tests?
- 21 MS. HENNESSEY:
- 22 A. No, in that particular issue, there's no
- 23 reference to that.
- 24 CHAYTOR, Q.C.:
- 25 Q. Okay. And it goes on to say, "Eastern Health

Page 362

24

11

- discovered the problem a year and a half ago, 1
- but they are still not saying what went wrong 2
- 3 or how many women got false results." So I
- take it that's what's also being reported in 4
- 5 the media?
- 6 MS. HENNESSEY:
- A. Yes. 7
- 8 CHAYTOR, O.C.:
- 9 Q. And then when we look at the anticipated
- 10 questions, Ms. Hennessey, we have, "Why is it
- 11 taking so long for cancer survivors to get
- 12 answers? Have all those affected been
- notified? Are all test results back? What 13
- 14 assurances can you give the public this won't
- happen again?" So in terms of identifying the 15
- issue that's coming out in the media. 16
- 17 MS. HENNESSEY:
- A. Right. 18
- 19 CHAYTOR, Q.C.:
- 20 Q. The two points being what went wrong and how
- 21 many women got false results. Can you explain
- 22 why neither of those questions appear under
- 23 "Anticipated questions" when those are the two
- 24 questions being posed in the media?
- 25 MS. HENNESSEY:

A. No, I can't.

- 2 CHAYTOR, O.C.:
- Q. Ms. Hennessey, at this point in time you 3
- understand that the data has been provided by 4

Page 363

Page 364

- 5 Eastern Health?
- 6 MS. HENNESSEY:
- A. Yes.
- 8 CHAYTOR, Q.C.:
- Q. The numbers are in?
- 10 MS. HENNESSEY:
- A. Yeah. 11
- 12 CHAYTOR, Q.C.:
 - Q. They're planning to go public with a media
- 14 briefing in a couple of weeks?
- 15 MS. HENNESSEY:
- A. Right, yes.
- 17 CHAYTOR, Q.C.:
- Q. And that they're planning to resume testing?
- 19 Did you understand that in late -
- 20 MS. HENNESSEY:
- 21 A. That they were planning to resume testing in
- 22 February.
- 23 CHAYTOR, Q.C.:
 - Q. Yes. Did you at that point in time, and these
- 25 questions being posed now again in the media,
- what went wrong, did you go back looking for 1
- 2 the general findings that you had requested
- the November previous? 3
- 4 MS. HENNESSEY:
- A. When this note was being prepared, I didn't go 5
- back to Eastern Health at this time. 6
- 7 CHAYTOR, Q.C.:
- Q. And why not? 8
- 9 MS. HENNESSEY:
- A. I think, Ms. Chaytor, I'm sure you appreciate 10
 - that this is not the only file that I was
- managing, that I was doing my best to manage 12
- 13 quite a number of files in the department and
- 14 I have to rely on staff who work with me to
- assist in the preparation of briefing 15
- materials. 16
- 17 CHAYTOR, Q.C.:
- Q. Ms. Hennessey, did you have concerns that you 18
- were having to approve briefing notes without 19
- having had the benefit of attending all the 20
- 21 meetings and briefings related to the issue?
- 22 MS. HENNESSEY:
- A. Yes, I did have some concerns about that 23
- throughout, you know, the couple of years 24 25
 - because at certain points in the file I felt I

- wasn't as close to the file as perhaps, you 1
- 2 know, it would have been more helpful if I had
- been in some of these, the meetings with 3
- Eastern Health in preparing the briefing 4
- notes. But having said that, the briefing 5
- notes, when they were done, were sent on to 6
 - the deputy minister for his review and sign
- 8 off and, you know, the changes that he would
- have wanted made would have come back to me.
- 10 CHAYTOR, O.C.:

7

16

- Q. And there were times, though, that he also 11
- wasn't necessarily involved or didn't attend 12
- all the meetings, either? 13
- 14 MS. HENNESSEY:
- A. With respect to the meetings with the minister 15
 - with Eastern Health I understood, rightly or
- wrongly, that he was present for in all the 17
- meetings with Eastern Health. 18
- 19 CHAYTOR, O.C.:
- Q. Except you told us yesterday the August 15th 20
- 21 one?
- 22 MS. HENNESSEY:
- A. Oh, except the August 15th, I'm sorry, yeah.
- 24 CHAYTOR, Q.C.:
- 25 Q. Okay.

Page 366

- 1 COMMISSIONER:
- Q. Ms. Chaytor, wherever you can find a 2
- convenient place, we'll break. 3
- 4 CHAYTOR, Q.C.:
- Q. Did you, in your experience in working with 5
- Minister Osborne, and he would have been your 6
- 7 minister that you're preparing these note for
- at this point in time. 8
- 9 MS. HENNESSEY:
- A. Right. 10
- 11 CHAYTOR, Q.C.:
- Q. Did you find him to ask a lot of questions and 12
- try to be fully informed on issues? 13
- 14 MS. HENNESSEY:
- A. Minister Osborne did, he was what I call a 15
- detail minister and he did ask a number of 16
- 17 questions on different files.
- 18 CHAYTOR, O.C.:
- Q. Okay. And was that also true on the ER/PR 19
- issue, did he ask a lot of questions? 20
- 21 MS. HENNESSEY:
- A. With respect to fall 2006 I do not recall a 22
- lot of personal engagement with Mr. Osborne on 23
- 24 this file.
- 25 CHAYTOR, Q.C.:

- Page 367 Q. Do you recall him coming back on any of your
 - 2 briefing notes and asking for any more
 - information? 3
 - 4 MS. HENNESSEY:

7

9

10

13

19

1

2

- A. I don't recall. I mean, if--we would have 5
- done with Minister Osborne, we would have 6
 - done--when the House of Assembly was in
- 8 session, we would have done daily briefings
 - and if there was any changes that he wanted
 - made, they would have been made at that time.
- 11 CHAYTOR, O.C.:
- Q. Are you aware of another meeting that took 12
 - place in November, 2006 involving the deputy
- minister, Mr. Tilley and the communications 14
- personnel from the department and Eastern 15
- 16 Health?
- 17 MS. HENNESSEY:
- 18 A. I do remember. I wasn't involved in the
 - meeting, but I do remember that there was a
- 20 meeting.
- 21 CHAYTOR, Q.C.:
- Q. And what did you understand to be the purpose 22
- of that meeting? 23
- 24 MS. HENNESSEY:
 - A. I understood the purpose of the meeting was to
 - Page 368 try and improve, I guess, improve
 - communications among the communications staff
 - between the department and Eastern Health. 3
 - 4 CHAYTOR, O.C.:
 - Q. So was there a sense that there was an issue 5
 - between communications between the department 6
 - 7 and Eastern Health?
 - 8 MS. HENNESSEY:
 - 9 A. My sense was that Ms. Mundon felt that she was
- not always getting the information that she 10
- 11 was requesting from Eastern Health.
- 12 CHAYTOR, Q.C.:
- Q. And did she discuss that with you?
- 14 MS. HENNESSEY:
- A. Just very briefly. I mean, Ms. Mundon 15
- reported to Mr. Abbott and I think that was 16
- 17 the purpose of that meeting was to talk about
- some of the issues that existed between the 18
- two organizations related to communications. 19
- 20 CHAYTOR, O.C.:

22

23

- 21 Q. And, actually, that meeting, I believe, may
 - have taken place the first week of December as
 - opposed to I think I said late November, but
- it's probably December 4th. 24
- 25 MS. HENNESSEY:

Way 27, 2008 Willi	u-rage inquiry on Hormone Receptor Testing
Page 369	Page 371
1 A. Yeah.	1 situation?
2 CHAYTOR, Q.C.:	2 CHAYTOR, Q.C.:
3 Q. So what did Ms. Mundon tell you, was she able	3 Q. Around this issue.
4 to give you any specific examples of what her-	4 MS. HENNESSEY:
5 -why she was concerned?	5 A. I'm just trying to think back. I mean, as
6 MS. HENNESSEY:	6 I've said through my testimony, there's a
7 A. I don't recall specific examples. I do recall	7 number of people at Eastern Health involved in
8 her saying when the meeting was over that she	8 this, there was a number of people in the
9 didn't feel that the issues had been resolved.	9 department and, you know, if we felt that we
10 CHAYTOR, Q.C.:	weren't getting a clear picture throughout,
11 Q. Okay. Did she tell you anything else that was	maybe we weren't asking the right questions.
discussed in that meeting?	12 CHAYTOR, Q.C.:
13 MS. HENNESSEY:	13 Q. Okay. Is that a sentiment that you heard
14 A. No, she did not.	anyone express in the department, that there's
15 CHAYTOR, Q.C.:	a sense that unless the department asks a
16 Q. Okay.	direct question it may not be getting a
17 MS. HENNESSEY:	complete answer from Eastern Health, do you
18 A. Not that I can recall, anyway.	recall anyone expressing a sentiment to that
19 CHAYTOR, Q.C.:	19 effect?
Q. And her sense, Ms. Mundon's sense was that she	20 MS. HENNESSEY:
21 wasn'tthe communications personnel at	21 A. I wasn't in anyI don't recall being in any
22 Eastern Health weren't communicating	discussions with the deputy minister on that.
23 effectively with her or completely with her?	23 CHAYTOR, Q.C.:
24 MS. HENNESSEY:	Q. How about Ms. Mundon, was that the nature of
25 A. Yeah, my sense was that there was some	25 the complaint that Ms. Mundon communicated to
Page 370	Page 372
challenges between Eastern Health and the	1 you?
department in the area of communications, but	2 MS. HENNESSEY:
3 -	3 A. Yeah, I think she may have expressed, you
4 CHAYTOR, Q.C.:	4 know, from a communications perspective that
5 Q. Did you -	5 she wasn't getting the full picture.
6 MS. HENNESSEY:	6 CHAYTOR, Q.C.:
7 A I mean, Ms. Mundon would be better position	7 Q. Commissioner.
8 to speak to the details around that than I am.	8 COMMISSIONER:
9 CHAYTOR, Q.C.:	9 Q. All right. We're ready to break. We'll break
10 Q. Was that your experience, as well, did you	until 9:30 in the morning. I've been asked to
have any concerns yourself about receiving	advise counsel to not turn off your computers
information from Eastern Health?	because there's a small gift arriving for you
13 MS. HENNESSEY:	13 shortly. 9:30.
14 A. When I was dealing with Heather Predham and	14 Upon conclusion at 5:00 p.m.
Dr. Williams and Mr. Tilley on this file, I	
felt that the informationyou know, I didn't	
feel that I was struggling to get information	
from these officials.	
19 CHAYTOR, Q.C.:	
20 Q. Did you have any sense that unless the	
department asked a direct question of Eastern	
Health it may not be getting a complete	
answer?	
24 MS. HENNESSEY:	
25 A. With respect to a complete picture around a	

_'-

'[1] 292:15

'background' [1] 275:8 **on** [1] 292:5

-I[1] 192:5 or [1] 15:1

-that [1] 294:18

-the [1] 20:5

-why [1] 369:5

-with [1] 208:15

-0-

0096 [1] 84:9 **0098** [1] 134:22

0124 [5] 5:23 11:23 17:7 32:6 116:15

0125 [7] 179:13 181:9 218:6 231:3 285:25 297:8 360:20

0141 [2] 10:21 17:25

0171 [1] 275:3

0192 [4] 276:2 278:3 284:10 307:10

0819 [1] 259:16

0820 [1] 266:20

0859 [1] 72:18

-1-

1 [2] 113:24 271:14 **10** [2] 157:22 271:14

100 [3] 192:9 225:6 226:9

101 [5] 242:5,17 244:24 245:20 266:1

10:30 [2] 261:6 266:17

10:59 [1] 292:6

11th [2] 235:24 237:5

12 [1] 67:2

124 [2] 46:14 157:21

12:41 [2] 280:16 281:23

12:43 [1] 282:10

12th [1] 72:20

13 [3] 240:3 351:25 352:1

14 [2] 77:3 259:17

1417 [1] 64:21

142 [3] 16:5,20 19:18

1436 [1] 16:1

1440 [1] 88:2

1441 [4] 102:12 106:1 133:25 134:4

147 [2] 19:9,10

1477 [2] 233:19 291:17

14th [1] 240:24

15 [1] 105:20

153 [4] 17:20 18:7 19:9

19:16

15th [17] 45:7 54:4,5,8

175:12,22 181:11,17 182:14,20 195:10 196:25 241:5 267:5 316:5 365:20 365:23

16 [5] 17:23 18:8 19:19 273:25 274:17

16th [3] 33:17 43:4 316:5

17 [12] 78:23 87:22 259:10 275:4 277:9 279:25 280:15 281:19 282:9,25 283:24 284:17

171 [1] 242:5

176 [13] 242:2,2,16 243:8 243:17 244:14,18 245:7 245:9 246:1,3 266:5 277:15

17th [21] 51:18 54:5 93:3 93:9 113:9 135:13 154:15 155:1,4 253:5 257:24 258:1 283:11 284:14 295:16 307:15 315:21 316:5 322:14 328:16 329:17

18[1] 281:12

18th [40] 194:20 195:8 220:8 221:3 223:2 231:10 231:11 234:6 236:17 239:17 248:6 249:25 250:12 257:22 262:20 263:1 284:5 288:12 292:2 292:4.5 299:23 300:6.8 301:13,18 305:13 306:12 307:2,11 308:24 322:12 324:8,19 325:4 330:2 331:5,11 333:15 339:17

19 [1] 75:6

1994 [1] 17:16

-2-

2 [1] 194:23

20 [12] 17:23 18:8 19:20 33:17 43:4 260:3 262:5 263:7,17,20 265:7,13

2002 [1] 10:18

2003 [2] 13:23 14:13

2004 [1] 17:16

2005 [41] 3:17 10:17,22 12:23 13:22 16:3 45:8 51:4,18 54:3,4,4,5,7 65:11 66:16 67:2 72:20 75:6 80:21 84:16 101:17 106:21 113:9 117:1 135:14 138:6 139:3.19 140:9,16,17 141:16 143:5 146:21 149:2 153:21

157:25 160:12 314:10 357:22 **2006** [65] 54:5 154:12 161:18,21 162:22 164:15 168:9,17 175:12,22 179:21 180:4,13 181:21 182:14 195:10 196:25 214:8,16,24 215:3,9 218:6,21 221:3 224:24

224:24 230:10 231:10,11 234:6 235:24 237:5

239:10,12,14,17,24 243:12 259:17 280:15

281:12,19 282:9,25 292:4 324:8 335:6,13 336:25 337:7,21 338:24 339:10 339:17 340:1,11 341:7 347:18 353:18 356:7.18 360:22 366:22 367:13

2007 [12] 41:1 42:4 54:6 54:8 61:22 77:4 179:25 180:18,24 181:5 226:24 322.1

2008 [7] 1:4 174:11 178:22 233:24 291:23 373:5,12

20th [6] 4:11 12:23 13:7 13:22 336:25 337:7

21 [1] 133:22

21st [1] 54:3

22 [8] 278:18 281:1 285:6 285:7,18 286:8 297:16 307:21

22nd [1] 45:8

23rd [18] 54:5 154:11 164:15 168:9.17 188:21 215:3,9 233:24 291:23 335:24 336:3 341:10 343:23 344:13 346:10 347:11 360:8

24th [1] 337:21

25 [5] 133:11 141:1,21 143:5 162:8

27 [6] 1:4 28:25 60:15,15 133:11 359:18

27th [7] 218:5,21 344:2 347:15 360:22 373:5,12

28 [6] 80:21 269:12,18,20 270:12 271:12

2:15 [1] 88:1

2:56 [1] 92:11

2nd [5] 139:19 140:9 219:19 239:24 241:15

-3-

3 [4] 84:16 85:18 114:12 161:17

30 m 353:5

30th [8] 3:16 5:11 11:3 13:4,9 15:2 18:1,11

31 [1] 231:4

323 [3] 17:17,20 18:7

327 [2] 16:6 19:18 **33** [4] 243:21 286:1 297:9

328:5

35 [4] 16:6,21,21 337:20

350 [1] 133:6 **37** [1] 340:4

372 [1] 2:3

3rd [20] 5:5,19 13:5,22 14:4 16:3 18:13 41:15

42:12 46:3 47:5,13 48:2 48:7 99:20 115:10 117:3 123:1 338:24 339:10

-4-

4 [4] 2:3 32:7 114:17

241:19

40 [1] 128:16

422 [1] 270:9

43 [1] 360:20

45 [3] 55:19 92:12,12

4:59 [1] 101:17

4th [10] 99:6 101:1,17 117:3 140:16 160:24 161:20 162:7 241:20 368:24

-5-

5 [5] 43:1 54:4 114:20 180:12 328:15

5:00 [1] 372:14

5th [19] 7:22.25 43:25 48:2 98:10 100:10 140:16 141:16 143:13 144:11 153:20 154:22 155:6 157:25 160:12,24 161:21 162:7 214:15

-6-

6 [3] 46:14 114:20 307:10 **611** [2] 99:12,15

65 [4] 242:6 243:1 245:3 245:25

6th [2] 340:11 341:6

-7-

7 [3] 65:10 66:16 114:23 **70** [1] 188:15

73 [6] 17:21 18:7 19:15 19:19 33:12 133:7

7:21 [1] 360:10

7th [10] 110:14 117:1.8 138:6 149:2 152:20 159:2 230:21 234:10 315:16

-8-

8 [5] 171:16 175:11 179:13 181:9 195:11

80 [1] 188:15 **8:00** [1] 271:9

8th [1] 315:16

-9-

90 [1] 188:15

923 [6] 238:15 239:2,4,9 240:5,15

939 [7] 238:11,23 240:4 245:12 260:9 270:11 278:22

9:30_[2] 372:10,13

9th [6] 179:21,25 180:12 180:18,24 181:5

-A-

Abbott [101] 6:10,11,16

A.D [2] 373:5,12 a.m [1] 292:6

6:20 16:4 20:10,15 21:20 22:17 23:2,5,6,11 35:15 35:24 46:8 47:8,13,15 51:22 52:14 53:1,11 58:21 59:15 61:10.17 67:1 68:17 73:1 77:18 80:22 81:4,5 94:19 132:6 143:20 158:7.10.12.15 167:2,21 169:2,14 170:13 219:8 256:21,25 257:8 257:11 258:10,13,15,19 258:20 259:2,3,8,10,13 266:10 275:19 276:3 280:15 281:18 282:18 283:11,21 284:1,3,15,18 292:11,19,23,25 293:3 293:18 294:4 295:5,16 313:17,21 315:3 322:24 323:4,13,16,17 328:17 329:6,9,11,20 338:25 342:3 344:4,8 347:10 368:16

ability [2] 302:3 373:9 **able** [32] 60:11 66:5 86:4 89:20 95:22 102:25 103:7 103:11 112:18 119:13 126:24 127:5 128:10 145:3 153:22 178:20 183:3 199:5 259:12 271:16 275:5 288:17 289:12 293:17 294:10 312:19 315:6 316:23 334:14 349:12 354:16

369:3 **aboriginal** [1] 62:25 **above** [1] 278:14 **absolute** [3] 185:22

189:21 193:4 **Absolutely** [1] 308:5 **absolutes** [3] 190:14

192:15,17 **accept** [18] 20:5,7,15 21:3 22:13 23:11,18,20 23:25 25:9,25 26:4,13 178:9,11 189:20 357:22

359:8 **acceptable** [1] 142:1 accepted [10] 21:11,15 23:2,5 25:2 26:19 133:4 189:23 348:22.23

accepting [2] 28:3 33:11 access [2] 129:22 176:21 accommodating [1] 162:14

according [4] 36:13 278:21 289:18 314:7

accountability [1] 211:25

accountable [3] 74:19 74:21 76:22

accredited [1] 247:21 accuracy [2] 172:7 358:18

accurate [9] 172:15 173:18 174:3 176:8 183:18 249:19 255:24 299:6 304:22

accurately [2] 28:20

303:17 acknowledge [1] 323:12 acknowledged [2] 134:11 323:5 acknowledgement [1] 135:4 acknowledging [1] 326:11 **Act** [2] 130:10,16 **action** [11] 1:13 43:7 202:11 278:21 279:6,7 280:25 285:14 328:6 331:22 332:2 actions [1] 208:13 active [1] 210:22 actual [2] 6:18 113:11 add [2] 28:9 47:19 **added** [5] 47:17,20,22 48:11 189:9 **adding** [3] 31:3 88:13 185:2 **addition** [2] 62:22 276:3 **additional** [15] 11:10 12:18 31:19 37:13,17 47:17 49:11 138:11 160:15,19 161:9 163:14 164:1 202:22 207:4 **address** [9] 65:13 66:1 66:11 96:7 101:20.25 108:16 340:17,23 addressed [3] 66:9 220:20 227:12 **adequacy** [1] 114:16 **ADM** [2] 25:14 36:4 **ADM's**[1] 177:18 administrative [3] 241:4 267:19 276:12 **advanced** [1] 188:20 **advantage** [1] 29:25 adverse [2] 64:18 208:1 advice [1] 93:1 advise [8] 69:25 82:21 204:5 207:10 209:19 275:18 279:10 372:11 advised [10] 7:8 34:4 204:12 222:1 234:17 275:19 286:21 292:9 293:11 341:25 advises [5] 281:1 285:18 286:7 297:16 307:21 advisor [2] 59:11 343:2 **affected** [2] 351:16 362:12 **afforded** [1] 132:15 **afternoon** [8] 195:3,4,6 240:20 262:25 277:5 280:7 315:23 **afterwards** [2] 215:13 251:25 **again** [44] 18:1 60:5 62:16 73:8 77:2 80:21

93:16 104:17 106:1

119:12 122:17 129:8

132:23 133:3,16 175:4

175:17 179:6 182:3,23

199:25 218:7 219:7,21 221:2,4 237:5 266:21 267:12 275:11 281:24 282:16 285:13 290:9 292:2 303:13 306:7 321:17 336:23 340:4 352:4 358:1 362:15 363:25 **agencies** [2] 339:2,4 agenda [5] 78:23 80:4 80:10,17,23 **ago** [4] 94:1 234:22 301:21 362:1 agree [4] 231:20 232:11 232:13 295:9 agreed [5] 286:18 289:4 292:12 294:8,12 **agreeing** [2] 293:20 294:5 ahead [3] 170:11 311:21 358:15 **al** [1] 1:9 **alarm** [1] 175:4 **Albeit** [1] 265:22 **alive** [1] 349:11 **almost** [1] 33:2 **alone** [1] 295:22 along [13] 27:18 28:17 74:13 122:19 170:22 192:16 206:9 207:1 237:25 272:4 327:23 345:8 354:15 **always** [6] 32:2 176:5,8 177:20 319:8 368:10 among [1] 368:2 **amongst** [1] 61:7 amount [3] 60:11 212:17 341:23 **analysis** [20] 25:1,18 26:1,8 31:3 245:13,18 333:17 334:10,16 335:4 335:11,16,19 336:11,18 348:11 357:15 358:9 359:10 **angle**[1] 302:22 announcement [1] 75:9 **annual** [1] 212:18 **annually** [1] 133:7 answer [46] 9:2,25 26:6 89:21 110:20 119:13 122:16 127:6 147:24 148:8,14,15 149:15 150:11 153:22 157:7 159:21 161:6,14 196:9 198:7,12 199:3,5,15,17 200:21,25 201:3,13,24 202:2 207:16 215:20 235:12 252:14 270:4,6 271:9 272:1 273:1 305:24 315:6 340:5 370:23 answered [6] 100:4 122:10 137:24 157:4,13 287:2

293:23 **April** [18] 33:2 143:1 165:17 166:5 171:14 182:10,16,21 187:2 **answering** [4] 129:10 195:19 212:20 218:5,17 218:21 219:2 220:3 221:7

answers [5] 118:9 147:23 199:8 361:4 362:12 **antibody** [1] 114:5 **anticipate** [6] 76:19 124:22,23 125:1 129:12 129:25 **anticipated** [18] 35:13 117:17 119:7 124:18 159:8,16 160:7,9,17 161:6 162:17 164:21.23 218:7 220:10,24 362:9 362:23 anticipating [3] 146:19 147:11 162:21 **antigen** [1] 114:4 anyhow [1] 93:2 anyway [2] 306:11 369:18 **apart** [1] 156:13 **apologize** [1] 228:9 **apparatus** [1] 373:10 appear [8] 15:20 35:24 160:9 219:22 262:9 286:17 295:24 362:22 Appearances [1] 1:5 appeared [2] 57:20 239:21 **applying** [1] 358:6 **appreciate** [5] 15:3 29:2 128:11 140:22 364:10 **apprise** [1] 56:13 apprised [2] 81:14 82:11 approach [11] 24:24 25:13 26:3 28:2 55:8 69:14,16 70:5,6 71:18 123:6 approached [1] 242:7 appropriate [2] 12:3 208:13 appropriately [2] 208:21 270:2 **approval** [6] 190:13 275:12 312:6,16 313:8 313:13 **approve** [8] 278:15 292:10,18 293:17 294:10 312:20 315:4 364:19 approved [45] 6:10,12 47:13,15 98:11 116:22 158:1,11,15 164:19 165:25 166:9 169:3,12 172:17 173:10,12,20,25 174:2,13,17 175:17 177:7 177:8.19.20.25 178:1 179:22 182:23 218:22 219:20 221:2 231:21 232:2 249:10 255:20 279:9 292:8,21 313:7 337:22 340:7 360:23 **approving** [3] 176:4,5

340:14 135:15,19,22 144:5 155:12 341:14,17 365:12 area [7] 21:1 71:6 203:7 211:15 212:7 339:13 **attendance** [2] 77:19 370:2 338:23 **attended** [3] 54:6 78:10 areas [1] 211:13 78:13 **arisen** [3] 14:13 96:22 **attending** [4] 33:16 43:3 289:19 44:12 364:20 arising [2] 131:19 154:24 **attends** [1] 77:23 **arriving** [1] 372:12 **attention** [17] 14:15 article [3] 3:19 214:10 18:17 70:11,13 114:14 214:15 114:18 133:24 171:18 ascertain [2] 289:24 172:13 173:19 179:19 290:2 193:14 194:1 260:15 asks[1] 371:15 277:11 315:17 361:6 **aspect** [1] 123:20 **audible** [1] 284:7 **aspects** [1] 260:20 **August** [77] 43:25 54:4 **Assembly** [27] 52:5 54:4,7 194:20 195:8 54:17 55:2,14,25 60:14 230:9,21,22 231:10,11 76:21 83:15.17.24 85:7 234:6.10 235:24 236:16 85:10 86:25 89:22 93:12 237:5 239:12 241:5,8 95:6 119:14 150:5 154:1 248:6 249:25 250:12 154:4 158:18 172:23 253:5 259:10,17 262:20 187:23 229:24,25 344:3 263:1 267:5 273:24 274:17 275:4 277:9 367:7 279:25 280:15 281:12,19 **assess** [7] 152:3 166:5 282:9,24 283:10,23 208:19 218:17 220:3 284:14,17 288:13 292:2 221:7 340:15 292:4,5 295:16 299:23 **assessing** [1] 210:15 300:6,8 301:13,18 305:13 assessment [6] 182:10 306:12 307:11,15 308:24 187:3 195:19 208:11,18 315:16 322:11,14 324:8 324:18 325:3 328:16 **assign** [2] 62:15 64:8 329:16 330:2 331:4,11 333:15 335:12 339:17 **assigned** [2] 63:19 64:5 347:18 350:10,15 356:7 **assignment** [1] 63:25 365:20.23 **assist** [14] 5:17 39:3 **authored** [1] 251:21 97:18 128:11 136:25 authorities [28] 1:17 145:16 155:19 191:12 36:13,23 37:3,7,12,23 192:6 255:18 271:16 38:14,22 39:7,16,23 302:2 315:19 364:15 40:22 42:2 60:25 81:12 **assistance** [12] 37:8,13 82:6,7,18,23 131:3 208:5 37:18 95:23,25 123:7 209:16 211:20,20 212:1 137:3,19 145:6,13,17,23 213:5 238:5 **assistant** [1] 99:8 **authority** [25] 1:11 29:9 assistants [3] 241:4 29:10,14,22 71:12,23 267:19 276:13 81:15 89:13 90:22 130:23 **assists** [1] 84:9 131:11.20 203:22 208:3 208:12.20 209:1.7.18 **Association** [1] 1:14 210:1,6,19 213:2 338:5 assume [3] 241:8 269:15 **available** [16] 12:24 56:5 275:13 56:7,9 60:7 64:14 77:14 **assumed** [1] 189:2 98:14 121:21 237:8 254:1 **assurances** [1] 362:14 259:9 315:18 326:13 **assure** [7] 127:24 167:11 328:10 356:7 196:1,19 207:5 227:14 aware [44] 4:23 6:21,25 227:22 33:10 42:1,6 54:2 66:14 **assuring** [1] 156:1 75:15 82:24 86:9 98:18 131:6.17 132:5 171:12 **ATIPP** [2] 217:2,5 171:13 177:11 214:3,20 **attached** [11] 140:3 214:24 217:6,15,23 236:1 267:22,23 278:13 248:10,16 249:14 271:19 280:23 281:16 309:18 320:15 321:23,25 322:3 344:5 347:14 348:24 324:8.13 327:1.16.18.20 attempted [2] 101:2 329:22,24 347:5 357:4 102:3 360:11 367:12 attempting [2] 108:17 away [5] 60:21 64:10,12 110:3 144:15 213:3 attend [10] 53:23 78:4

174:5 228:3 274:6

awry [1] 213:13 -B-**B** [1] 47:9 **B.C** [3] 95:1,10,18 **background** [10] 47:22 97:2 132:22 160:20 174:24 232:23 260:2 288:16 289:12 353:16 **balance** [1] 60:22 **Banerjee** [1] 113:10 **based** [28] 38:18 43:5 51:16 104:8 121:4 122:3 122:7 124:18 138:1 147:23 150:9 156:20 196:8 197:5 221:20 238:21 243:12 248:25 251:4 265:3 325:7 333:1 334:24 349:8,15,15 351:20 359:6 **basis** [10] 21:7,10 29:16 63:17 123:13 124:10 161:24 279:5 290:11 350:18 **batch** [1] 164:3 BC [1] 86:22 **bearing** [1] 266:9 became [6] 33:6 41:25 42:6 214:20 304:16 321:18

become [8] 3:18 10:1,2 79:9 214:3 217:15 222:13 322:3

becoming [3] 8:22 33:25 142:1

began [6] 117:22 165:10 182:4 195:14 219:24 252:22

begin [9] 27:8 44:21 165:19 182:11 195:20 218:18 220:4,4 221:8

beginning [6] 34:14 36:14 99:17 115:11 148:19 281:5

begins [1] 267:1

begun [3] 151:3,25 156:7

behalf [2] 267:20 269:5

believes [1] 67:18

bene [1] 274:18 **benefit** [1] 364:20

Bernard [1] 1:6

beside [1] 254:7

best [26] 7:8 18:23 24:1 28:19 64:8 75:22 91:3 120:22 137:5 191:11 192:6 205:13 232:21,25 233:16 237:19 266:17 270:6 303:16 304:21 305:20 314:4 315:23 332:5 364:12 373:9

better [4] 63:4 112:22 114:23 370:7

between [22] 3:15 4:23 55:16 56:24 82:5 139:6 139:12 209:16 222:11

241:8 251:18 266:22 271:14 321:15 322:8 342:11,18 368:3,6,6,18 370:1

Bev [1] 253:13

Beverly [2] 57:18 179:22

big [1] 19:9

bigger [1] 79:9

birthday [1] 144:15

bit [6] 61:3 69:15 77:13 137:4,13 173:22

blackberry [10] 101:20 106:11,14 107:18,23 260:18 272:21,22,24 273:1

blocks [1] 114:21 **board** [7] 36:5 65:14 66:2 176:20 276:18,20 320:1

Bob [2] 87:25 92:14 book [1] 83:24 **bother** [1] 267:11 **bottom** [8] 6:8 88:5 98:13 139:11,11 159:20

176:1 275:4 **brackets** [1] 242:2

branch [6] 70:16 85:15 176:19 212:13 276:13,20

break [13] 15:2,5 105:15 194:17,23,24 277:5 280:4 280:7 285:3 366:3 372:9 372:9

breaks [1] 99:15 **breast** [11] 1:12 48:13 48:19 65:12 133:6 196:2 227:23 361:3,5,7,19

Brian [1] 231:7 **brief** [14] 87:22 93:2 154:18 205:21 251:6 262:21 263:3 286:16 300:10 306:14 331:4,16 331:25 332:19

briefed [6] 136:8 154:15 204:21 342:3 345:20

briefing [289] 3:22 4:7 5:2.10.17.18 6:3.15 7:12 7:15 8:12,16,20 9:9 10:12 11:4,22 12:24 13:22 14:4,16,21 15:6 15:15,21,23 17:7,25 18:10 19:22 20:3 21:8 24:3,12 27:22 28:5,9,23 28:24 29:11,15,20,23 30:3,7,13,15,17,20,25 31:5,7,11,15,21 32:8 34:19,23,24,24 36:13 37:21 38:8,17 42:15,25 43:15 44:5 46:15 48:7 51:19,20 52:5,22 55:2 55:13 56:14 57:1,21 59:20,23 83:23,24 84:25 85:13 87:18,21 93:11 95:4,6,16 98:9 100:20 110:14,19 116:16 117:8 117:16 119:12 120:24,25 121:4 124:8,10 125:12

126:6,15 128:5 132:20 133:4 135:14,20,23,25 136:5,8,11,15,21 137:5 137:8,15,17 138:5,8,12 139:1 142:11 143:18 146:11 148:25 149:19 152:16,20 154:3,10,11 154:18.19.21.25.25 155:3 155:9,21,23 156:20 157:24 158:1,4,6,17,20 159:1 160:5,11 164:13 167:19 168:3,8,10,12 169:8.9.15 172:9 173:10 175:11 176:1 179:15,20 180:19 181:10,11 187:22 190:13,17 191:12 192:15 193:9,11,20,21 194:7,20 195:8 198:9 204:17,20 215:2,3,14 216:25 217:4 217:18 218:2,5,21 219:19 221:2 223:1 227:19 229:14,18,23 230:12 231:5 233:5 234:7,15 235:4,25 239:5,9,16,25 240:2 243:22 247:5.25 248:16,21 249:3 252:22 257:1,2 261:14,21,23 268:11 269:1 277:8 278:14,19 282:24 292:5 301:13,18 302:5 311:5 317:10,13,15,25 318:23 319:12,23 320:8,24 322:12 324:9.14.18.19 325:4 327:6,13 328:11 329:3 330:3 331:20 336:2 337:21 339:1,2,12,21 340:5,5 341:3 343:23 344:3,6,20,25 345:4 347:10,14 353:4 359:15 360:13,21,24 363:14 364:15,19 365:4,5 367:2

briefings [12] 54:13,13 54:25 55:8,11,16,17,20 55:25 194:8 364:21 367:8

briefly [2] 35:19 368:15 **bring** [7] 14:14 105:25 113:8 133:24 171:18 173:19 179:19

bringing [3] 83:9 193:13 193:25

British [1] 45:5 broad [1] 74:24 **broke** [2] 195:9 314:14 **broken** [1] 34:15

Brook [6] 241:1 252:25 253:8 259:11 315:20 316:1

brought [4] 79:18 172:12 220:25 277:10

budget [1] 212:18 **budgets** [1] 37:17 **bullet** [25] 10:17 32:12 32:19 33:11.14 43:1 45:3 47:21,24 117:20 133:5 133:22 159:9 160:8 182:4 183:22 186:6 190:2 195:13 218:9 219:23 260:2,14 275:8,9

bullets [2] 65:12 260:6

business [2] 211:2 212:4 **busy** [6] 57:2 58:5 68:2 261:7 315:25 341:18

by/approved [2] 231:12

by/Heather [1] 231:21

-C-

cabinet [63] 7:18,23,25 8:12,17 9:19 10:9 30:9 30:15,16,25 31:1,4,4,10 31:15 34:25 46:16,22 47:6,10,15 49:1,3,9,19 72:6 230:13,25 231:16 232:4 233:3,6 234:24 235:9,14 237:21 238:6 240:25 243:23 247:13 248:22 251:13 253:4 256:7 259:11 262:24 274:9 297:11 312:9 313:10 314:9,21 315:7 315:21 316:7 318:8,20 324:24 327:8,14 339:5 339:22

Cake [5] 231:9,15 232:7 275:14 289:25

calculate [4] 349:9 350:6 359:16.17

calculated [1] 16:17 calculating [3] 349:21 353:11,24

calculation [6] 21:25 349:18 350:19 351:11 356:20 359:24

calculations [2] 22:8,12 **calls** [1] 124:3

Cameron [2] 1:3 373:6 Canada [1] 27:1

Canadian [1] 1:15 **cancelled** [1] 194:9

cancer [16] 1:12,15 45:5 48:13,20 65:13 86:22 133:6,8 196:2 227:23 361:3,5,7,19 362:11

cannot [1] 129:4 capacity [2] 34:10 162:12

care [8] 134:24 241:2 252:25 253:9 259:12 315:20 316:2 357:19

career [1] 130:20 careful [1] 160:3

Carolyn [5] 3:16 4:4,6 4:14 75:7

Carolyn's [1] 3:19 **carried** for 14:3 15:20 28:3 157:10 168:14 246:7 carry [2] 14:15 247:4

carrying [1] 47:23 Carter [1] 116:6

case [12] 24:5 29:8.25 33:1,3 40:11 72:17 73:9 187:19 216:3 319:2 357:21

cases [5] 26:24 33:12

114:8 358:22,24 catch [2] 18:17 361:6 categories [1] 99:16 caused [6] 118:24 149:17 156:14 157:12 202:17 279:2

causes [1] 209:24 causing [2] 174:24 175:6 cautious [6] 185:2 190:14,16,25 191:16

cautiously [2] 184:20 189:17

caveat [1] 326:15 **CBC** [7] 73:6,10,12,14 73:23 74:6 360:10

CBC's [1] 47:23 **central** [6] 1:16 213:2 326:1 339:2.4.14

certain [13] 60:11 99:16 112:21 151:1,6,10 153:8 184:19 186:2 260:20 261:25 265:3 364:25

certainly [64] 15:4 27:17 28:18 33:4 38:10 51:13 52:3,4 53:16,17 57:8 60:10 61:22 62:12.23 63:6,7 76:20 77:10 78:6 78:9 90:23 92:20 97:15 99:23 104:18 105:7 119:23 121:4,5 127:16 141:11 147:25 149:23 156:18 162:6 163:21 178:11,18 180:23 192:7 197:5,23 207:6 209:2 211:16 214:23 225:4 226:9 255:14 260:19 261:18,18,21,22 267:15 272:25 275:22 294:9 296:9 322:13 330:10 344:19 356:8

Certificate [2] 2:4 373:1 **certify** [1] 373:2 **challenges** [1] 370:1 **chance** [3] 64:24 240:23 277:4

change [38] 11:7 63:15 63:18.23 64:1 160:5 166:19 167:2 169:18 170:7,12 177:12 179:5 181:24 241:9 262:17 270:2,16 278:17 281:2 285:23 286:8 287:9 294:15 297:17 307:22 310:5 311:22 333:5,9 350:6,21 351:5,13 352:19 353:3 354:7,21

changed [12] 11:22 23:20 67:23 196:17 346:7 349:23 350:2,9 353:6 356:12,13,20

changes [34] 6:16,18,20 6:23 7:1,4,7,9 19:20 30:19 96:22 118:5 120:1 128:24 152:25 156:14 157:12 159:25 176:13,16 259:21 260:11 281:3 291:24 294:8,12,14

305:14 309:25 346:6 349:5 360:18 365:8 367:9 **changing** [3] 44:15 257:2 304:25 Chaplin [3] 3:16 4:4 75:7 **charged** [1] 203:6 **chart** [6] 242:4 243:7,25 244:7,10 275:10 **charts** [1] 338:6 **Chaytor** [1047] 1:7 2:3 3:2,3,5,10 4:2,13,18,25 5:8,14,22 6:2,7,19 7:10 7:20 8:2,6,10,19 9:24 10:11 11:2,12,17,21 12:7 12:11,20 13:6,12,17,21 14:2,6,11,24 15:13,18 15:25 16:14,23 17:5,12 18:6,16 19:2,14 20:9,14 20:19,24 21:5,13,18,23 22:5,9,15,20,25 24:4,10 24:15 25:10,17,23 26:9 27:5,14,20 28:1 29:1,4 32:5,11,18 33:9,21 34:13 34:18,22 35:3,14,23 36:3 36:8,12,19 37:5,20 38:1 38:7,13,20 39:5,14,24 40:7,12,18,24 41:10,14 41:18 42:5,9,24 43:20 43:24 44:4,10,23 45:2 45:18,22 46:5,12,24 47:3 48:3,10,21,25 49:12,18 49:24 50:7,12,16,20,24 51:6,21 52:8,12,17,23 53:6,10,21 54:9,14,18 54:23 56:2,6,11,18 57:3 57:15,19,25 58:8,13 59:3 59:13,21 60:16 61:1,19 62:1 63:9,13,24 64:4,19 65:7,22 66:6,15,24 67:10 68:9,16,21 69:9,18 70:4 70:12,17 71:17,24 72:7 72:15,23 73:4,21 74:4 75:4,16,24 76:9,25 77:16 77:22 78:2,12,18,22 79:10,17 80:2,7,14,18 81:19 82:1 83:7,16,21 84:2,7,14,20 85:2,16,22 86:12,19 87:7,12,16 92:2 92:9,21 93:7,14,25 94:2 94:8.17.24 95:20 96:8 96:13,24 97:5,10,23 98:3 98:15,20,23 99:3 100:2 100:13,18,24 101:15 102:10,21 103:6,12,17 103:21 104:7,19 105:3,9 105:14,16,23,24 106:5 106:15,20,25 107:8,12 107:17,21 108:2,7,12 109:1,5,7,12,17,21,25 110:8,17 111:9,14,18 112:1,8,15,23 113:3,7 113:14,19 115:9,18,22 116:4,14,21,25 117:6,15 118:14,18,25 119:6,11 119:17 120:3,11,15,19 120:21 121:7,12,16,20 122:6,14,24 123:3 124:15 129:8,9,19,24 130:5,11 130:18 131:8.16 132:4 132:12,19 133:2,15,21

134:3,9,14,20 135:3,12 135:18,24 136:3,9,16,24 137:7,12,21 138:4,13,20 139:4,10,16 140:4,14 141:3,13,19 142:10,22 143:4,24 144:10,17,23 145:5,12,24 146:9,24 147:4.10.16.21 148:4.12 148:23 149:9,20 150:8 150:16,20 151:5,9,14,18 152:4,11,19,24 153:6,18 154:8,16,23 155:5,10,15 157:20 158:8,16,25 159:6 159:13,19 160:22 161:4 161:11,15,16 162:3,20 162:25 163:8,17,24 164:5 164:12,18 165:2,7 166:7 166:18 167:1,7,16 168:7 168:15,21 169:1,13,23 170:2,6,10,20 171:3,15 171:22 172:1,6,14,20 173:3,8,13 174:6,10,16 174:21 175:1,5,9,15,21 177:22 178:4,12,19,25 179:7.11.18 180:1.7.11 180:16,25 181:4,8,16,20 181:25 182:22 183:8,17 183:21 184:6,14 185:1,6 185:10,14,20 186:4,9,14 186:19 187:5,12,17 188:1 188:8,19 189:5,19 190:1 190:5,11 191:2,17,23 192:12,22 193:2,8,12,23 194:11,17,18 195:1,2,7 196:14 197:7,20 198:5 198:15,24 199:7,12,16 200:2,8,12,17,24 201:5 201:11,17,22 202:4 204:3 213:25 214:1,9,14,19,25 215:8,12,17,24 216:5,16 216:21 217:9,14,21 218:4 218:14 219:5,12,18 221:16,22 222:5,14,20 222:25 223:6,16,22 224:1 224:12,19,25 225:9,16 225:20 226:1,11,18 227:2 227:16 228:2,9,11,16 229:2,13,20 230:4,11,16 231:2 232:5,10,14 233:7 233:12,18 234:3,13 235:6 235:16,22 236:7,12,18 236:23 237:4,15,23 238:8 238:14,20 239:1,6,11,15 239:20 240:1,8,13 241:7 241:14,18,25 242:21,25 243:6,11,20 244:3,9,13 244:17,22 245:2,6,17,23 246:6,10,18,22 247:1,9 248:5,9,15 249:2,7,13 249:17 250:1,8,13,17,25 251:8,14 254:13,19 255:3 255:9,19,23 256:3,10,14 256:20.24 257:7 259:1 259:15 260:1,24 261:12 261:17,24 262:4,8,12 263:5,16,22 264:3,10,16 264:21 265:6,11,19,25 266:4,8,19,25 267:4,9 267:21 268:1,5,10,15,20 268:24 269:7,23 271:1 271:11,16,18 272:3,10 272:15,20 273:3,9,17,23 274:5,14,22 275:2,17

276:1,9,14,23 277:4,6 277:14,21 278:1,8,12 279:21 280:3,10,11,19 281:11,15,22 282:3,8,15 282:22 283:3,7,13,19,25 284:4,8,13,19,25 285:11 285:17,22 286:5,20 287:1 287:7.18.24 288:6.19.24 289:5,15,23 291:16,21 293:1,6,10,14,19 294:1 294:11,19,23 295:2,8,13 295:20 296:2,11,15,19 296:24 297:3.7.15.22 298:3,8,13,17,24 299:7 299:14,20 300:2,11,15 300:20,25 301:4,10,16 301:22 302:1,12 303:18 304:23 305:4,11,17,21 306:1 307:8,14,18 308:4 308:8,14,23 309:3,10,17 309:23 310:4,9,13,17,22 311:3,9,15,20,25 312:5 312:11,15,21 313:1,11 313:16,20,25 314:6,13 314:18.23 315:2.10 316:11,19,24 317:4,9,14 317:19,24 318:9,14,21 319:3,11,16,22 320:3,7 320:11,17,22 321:5,11 321:21 322:2,7,15,20,25 323:11,15,19,23 324:3,7 324:16 325:1,9,19 326:4 326:14,20 327:4,11,17 327:22 328:3,14,20,24 329:4,10,19,25 330:12 330:18,25 331:9,14,19 332:4,10,14,18,22 333:4 333:12,23 334:3,15 335:9 335:17 336:1,6,12,16,21 337:3,13,19,25 338:11 338:17,22 339:8,15,20 340:2,10,20 341:4,13,24 342:5,13,17,22 343:3,8 343:14.19 344:7.11.22 345:5,11,17,21 346:3,11 346:16,20,25 347:4,9,19 348:4,9,15,25 349:7,24 350:8,13,20,25 351:12 351:19,24 352:6,15,20 353:8,17,20 354:9 356:5 356:11,16,25 357:6,10 358:10,14 359:13,21,25 360:7 361:2,11,17,24 362:8,19 363:2,8,12,17 363:23 364:7,10,17 365:10,19,24 366:2,4,11 366:18,25 367:11,21 368:4,12,20 369:2,10,15 369:19 370:4,9,19 371:2 371:12,23 372:6 **check** [6] 4:21 50:19 139:21 273:20 326:6 360:15 **checking** [1] 337:10

Cheeseman [1] 231:9

chief [5] 45:4,6 86:21,23

circulated [4] 262:24

296:22 315:9 333:10

choice [1] 114:21

chose [1] 270:15

229:8

circulation [1] 339:1 circumstances [1] 9:10 cited [2] 358:22,23 claim [6] 214:11 216:6 220:22,25 222:8,11 clarification [4] 23:10 31:19 49:4.15 clarifications [1] 291:24 **clarify** [2] 275:5 298:23 clarifying [1] 31:1 class [2] 1:13 279:7 **clear** [19] 22:16 26:4 41:24 43:18 51:25 91:18 110:24 122:23 150:17 167:17 184:18 192:9 193:6 206:9 261:13 265:12 275:12 312:1 371:10 **clearer** [1] 304:16 **clearly** [10] 39:6 53:7,15 128:22 142:17 180:3,8 181:1 189:1 354:8 **clerk** [1] 322:5 **client** [2] 70:21,23 **clinicians** [1] 114:24 **close** [2] 186:1 365:1 closed [1] 229:25 **Co-counsel** [2] 1:6,7 **Coffey** [5] 1:6 233:25 291:23 299:5 303:18 collected [2] 17:15 32:13 collective [1] 169:9 **Columbia** [1] 45:5 **comfort** [1] 202:12 **comfortable** [16] 26:20 162:1,4 183:11 185:21 205:13 208:14,25 210:9 219:6 220:14 221:23 222:3 228:18 288:13 313:12 **coming** [17] 61:21 62:9 107:18,22 125:7,17 128:4 140:23 148:21 152:2 166:5 245:12 252:6 254:25 345:20 362:16 367:1 **commenced** [3] 214:4 215:19 217:11 comment [12] 28:10 48:16 66:5 73:9 128:13 165:24 201:10 220:21

222:7,10 334:14 343:12 commentary [1] 257:9 Commission [6] 1:1,6 1:7 103:5 373:4,7

Commissioner [181] 1:3 3:1,6 8:25 9:5,16,22 23:9 23:16,24 29:3,17,24 30:6 30:12,22 31:12,22 32:3 53:23 82:3,12,17,25 83:5 88:3,22 89:6,14,25 90:6 90:12,19,24 91:8,15,24 105:13,19,22,25 111:1 120:23 123:4,12,17,23 124:4,14,25 125:5,11,15 125:20 126:1,10,17,23

127:3,18 128:8 129:2,7 129:10 155:17 156:9,23 157:8,18 174:23 175:3 175:23 176:24 177:6,11 177:13 194:15,19,22,25 195:3 196:6 202:14,19 202:23 203:4,14,20 204:8 204:15 205:2.6.17.24 206:8,22 207:8,14,19,24 208:7,17 209:4,8,14,22 210:4,12 211:4,10,18,24 212:9 213:6,11,17,24 214:2 251:16,24 252:4 252:17 253:1,10,19,24 254:4,11 257:1,13,21,25 258:4,9,14,24 277:3,7 280:6,9,12 290:8,15,19 290:25 291:8,14 301:5 302:20 303:5,12,21,25 304:6,13,18 306:6,15 307:1,6 323:7 329:20 352:18,24 354:18,24 355:4,6,17,25 357:16,25 358:4,12,16,21 359:11 366:1 372:7.8 373:7

Commissioner's [2] 129:11 274:7

commit [2] 60:12 64:14 **commitments** [1] 194:10

committed [1] 252:24 **committee** [4] 77:3,5,7 338:19

communicate [1] 61:12 communicated [6] 123:13 224:4 290:7 327:21 329:13 371:25

communicating [2] 210:17 369:22

communication [10] 58:18,19 77:23 81:2 82:5 102:17 124:19 259:17 274:9,13

communications [25] 4:5 54:19 55:4 58:22,23 59:1,5,9,16 61:6 82:13 83:4 85:11 99:10 103:14 103:23 176:14 367:14 368:2,2,6,19 369:21 370:2 372:4

Community [1] 231:14 company [1] 11:10 comparable [2] 349:2 356:17

compare [4] 10:13 158:9 159:1 348:1

compared [1] 24:19 complaint [1] 371:25 complete [5] 95:5 121:9 370:22,25 371:17

completed [13] 4:7 143:23 157:1 162:22 183:24 184:8,11 185:17 185:23 189:8 247:22 338:8 350:14

completely [1] 369:23 **completion** [1] 106:10 **complicated** [1] 355:20

computers [1] 372:11 concern [20] 10:3 24:17 33:22,25 35:5,11,17,25 71:14 112:2 216:10,15 220:19 265:12 296:3.7 325:21 326:23 337:14,18 **concerned** [8] 68:25 143:5 172:7,11 173:14 173:17 324:9 369:5 **concerning** [2] 330:2 336:24 **concerns** [11] 67:15 71:8 79:3 142:18 144:19 219:11 340:17,24 364:18 364:23 370:11 **conclude** [6] 110:15 115:12 124:11 129:1 237:10 355:13 **concluded** [1] 155:23 **conclusion** [3] 242:11 347:21 372:14 **conclusions** [2] 113:23 127:10 **condition** [2] 67:22 326:21 **conducted** [4] 45:7,15 49:21 242:9 **conducting** [1] 333:17 **conduit** [2] 213:19 358:1 **conference** [1] 144:5 **confidence** [1] 208:3 confident [11] 57:11 82:18 123:24 173:17 197:24 198:2.20 199:21 202:8 207:21 227:10 confidential [1] 74:12 confidentially [2] 74:11 338:4 **confirm** [2] 260:5 269:13 **confirmation** [1] 281:5 **confirmed** [5] 67:20 120:2 269:19 270:3,13 **confuse** [1] 228:12 confused [2] 155:18 306:8 connect [1] 259:12 consider [1] 355:11 considerable [3] 28:14 212:17,21 consideration [3] 349:20 352:10 353:10 **considered** [4] 269:25 271:20,21 353:1 consistency [1] 62:8 **consists** [1] 270:12 **consultant** [4] 28:12 71:6,7 196:18 **consultant's** [1] 340:12 **consultants** [32] 165:13 165:16 166:21 182:7.9 182:16,19,21 183:1 195:16,18,25 196:24 218:11,16,19 219:1,16 220:1,2,6 221:5,18 222:21,23 223:13 227:21

228:4,20,22 247:17 340:22 **consultants'** [4] 182:12 195:22 197:1,10 CONT'D [1] 3:4 **contact** [49] 36:22 37:2 37:14 38:14,22 39:22,25 40:6,22 41:5 42:13,21 42:22 44:13 59:19 69:13 69:24 70:7,10 73:23 84:11,15 86:13,14,18 89:3 90:11 92:5 93:4 98:2 109:13 187:21.25 188:3 206:11 224:9 235:3 242:4,14 243:8,15 252:7 253:14 273:25 274:4,25 275:22 335:2 338:13 **contacted** [20] 32:21 33:13 43:12 67:13 68:23 69:1 84:16 85:25 86:2,5 88:9,11,14,21 89:1,21 90:2 234:14 335:8 338:7 **contacting** [10] 69:17 84:22 85:23 86:15 88:7 88:25 92:23 93:17 94:5 94:20 **contacts** [2] 59:22 67:13 **contained** [2] 196:10 311:16 content [6] 8:7 34:23 101:22 127:21 261:19 304:5 contentious [1] 289:7 **CONTENTS** [1] 2:1 context [4] 200:13 228:14 291:11 306:17 **continue** [4] 76:6 196:21 227:24 247:23 **continued** [3] 55:24 186:10 227:10 **continues** [2] 101:1 281:7 **continuing** [5] 32:7 42:25 122:10 215:19 225.5 continuity [1] 62:7 **contrary** [1] 250:19 **contributed** [2] 51:14 53:16 **control** [6] 39:18 115:1 162:19 313:9,10 324:23 **controls** [3] 114:6,7,20 **convenient** [4] 105:15 194:16,21 366:3 conversation [36] 26:17

94:13,15 100:3 124:9

126:5 148:11 205:19

229:16 251:17 292:11

294:5 297:24 298:4,19

299:1.17.22 300:1.6.21

302:23 303:1,4,6 305:7

305:8,13 306:3,9,10,12

conversations [1] 302:3

306:19 307:2 312:18

conversion [2] 33:3

conversions [6] 16:7,21 345:7 349:11 350:1,7 **converted** [1] 18:9 **converters** [4] 351:9 354:3,6,21 **conveying** [1] 358:5 conveys [1] 82:7 Cooper [3] 47:9 49:2,7 **copied** [5] 46:17 68:6 140:15 142:7 231:6 **copies** [5] 99:7 102:24 103:1 132:6 235:23 **copy** [17] 50:13,17 51:1 131:15 233:9,14 272:18 278:14 285:4 308:11 320:4,8,10,12,15,23 343:23 core [1] 122:4 **corner** [7] 46:20 241:1 252:25 253:8 259:11 315:20 316:1 296:1 373:3 214:8 230:9 240:21 321:3 correspondence [3]

correct [28] 15:21 91:7 117:12,19 125:23 127:13 149:4 154:12 159:10.15 168:16 177:5,10 178:22 196:15 201:21 206:7 208:23 213:21 220:11 231:23 267:16 279:1 288:5 290:24 291:13

correctly [9] 18:20 85:12 267:13 271:8 302:22

116:5 233:22 236:25

council [4] 4:5,24 231:10

counsel [6] 304:16,19,22 306:9 328:10 372:11

count [1] 33:1

counterpart [1] 59:2 **couple** [13] 41:17 42:11 47:18 60:20 62:6 132:21 252:2 259:21 260:6 304:15 344:20 363:14 364.24

course [9] 10:12 13:13 34:15 36:5 61:20 75:6 87:2 134:23 192:16

cover [1] 113:11 coverage [2] 48:12

230:23 Crawley [2] 46:18 231:7

create [1] 255:16 creates [1] 114:11 **creation** [1] 330:3 critical [4] 116:10 117:24 119:2 146:12

crooked [1] 310:21 **crossed** [1] 169:22 crossing [1] 167:21 crucial [2] 198:10 200:4 **culture** [2] 173:22 178:8 curious [2] 141:7 171:4

current [12] 17:8 32:7 45:8 60:24 78:25 84:12 231:1 260:5 277:15 280:23 283:4 338:1 cutting [2] 141:8,11

-D-

daily [3] 55:17,25 367:8 DAKO [3] 10:18 113:24 114:1

damning [1] 116:8 **Daniel** [1] 1:10 **Darlene** [1] 1:12 **Darrell** [3] 59:4 72:25 338:25

data [10] 20:4 142:12 263:15 333:17 334:9 336:11 349:16 357:15 359:10 363:4

date [8] 17:20 65:17 72:19 90:2 181:19 282:9 339:22 360:3

dated [14] 113:9 179:21 180:17,20 182:13 221:3 231:11 235:24 278:9 281:12 282:24 283:23 360:21 373:11

dates [1] 140:6 days [3] 7:22 9:11 360:23 **deal** [4] 63:16 64:5 279:15 308:19

dealing [12] 28:22,24 51:17 55:8 58:14 68:14 69:7 108:9 186:6 191:6 355:2 370:14

dealt [1] 355:10 **Debbie** [10] 57:22 164:20 175:18 219:20 276:4,10 276:12 281:25 282:5,10

debriefed [1] 87:8 **debriefing** [2] 45:10,24 **deceased** [11] 242:1,3 242:10,13,17 243:7,17 244:14 246:13 265:24 342:12

December [20] 139:3,18 140:9,15,16 141:16 142:19 144:4,11 153:20 154:22 155:6 157:25 160:12,24 161:20 162:7 180:4 368:22,24

decides [1] 202:25 decision [4] 20:7 199:24 256:8 315:8

decisions [1] 202:24 **defined** [2] 52:18,24 **definitely** [1] 142:16 **definitively** [1] 126:24 **degree** [2] 288:17 289:13 delay [4] 39:15,21 259:19 334:17

delayed [3] 34:11 253:16 315:17 **delegate** [1] 56:21

delete [1] 260:3 deleted [2] 262:1,5 **deliver** [1] 208:6 **delivery** [1] 74:22 **demands** [3] 63:1,2 212:13

Denic [1] 236:2 **department** [134] 4:24 8:11 15:1,7 30:18 31:18 32:1 33:6,23 35:16 37:6 37:15 38:6 42:16 45:13 51:9,12 54:20 55:1,4,24 57:1 58:16,20 61:21 62:9 62:10 63:4,15 64:13 65:16 69:23 70:13 71:16 74:13 75:1,13,21 76:13 81:13 82:6,10,21 85:15 104:11 130:20,22 131:10 131:18 132:3 142:23 145:16 161:25 162:17 171:13 177:24 187:24 189:16 191:14 194:6 201:7,23 202:1,16,21 203:17,24 204:16 205:12 207:21,25 208:2,19 209:17,23,25 210:5,10 210:15 211:1 212:3,6,23 215:25 216:4,8,11,20,22 217:7,22 227:10 231:13 232:18 235:7,13 307:24 309:13.15 312:2.8 316:21 319:19,24 324:10,15 335:19,22 336:17 337:14 344:14.24 345:3.14 346:5 346:15,21 347:1 349:9 349:12 356:7 357:2,4,19 361:13 364:13 367:15 368:3,6 370:2,21 371:9 371:14.15

department's [5] 34:6 66:3 86:8 180:20 309:19 depending [2] 55:7 190:22

deputy [51] 20:4 24:16 25:3 51:17 62:2 68:6,14 69:7,10 71:22 77:12,14 85:12 98:12.17 136:14 138:14,19 158:21,24 166:24 172:4,5 173:6 176:15 178:16 201:9 204:24 205:7,9 206:10 206:19 207:2 256:18 296:8 316:6,25 321:2,3 321:7,10,20 322:14 324:22 325:7 345:25 348:22 359:7 365:7 367:13 371:22

Deputy's [1] 177:16 **describe** [1] 275:9 **described** [1] 116:6 describing [1] 29:5 **designed** [1] 154:4 desktop [2] 107:16 108:15

detail [15] 100:21 101:25 109:22 112:16 115:19 116:2 143:21 226:16 227:8 260:8 294:24 299:13 311:4 328:8

355:18

346:6

366:16 **detailed** [2] 71:15 299:11 **details** [15] 20:24 35:20 51:3 98:21 109:5 110:12 112:20 115:17 120:9 125:24 229:7 232:24 332:1 346:19 370:8 detected [1] 142:25 **detection** [1] 114:5 determine [5] 43:6 146:13 150:13 178:21 352.5 determined [3] 93:8 148:5 208:2 determining [3] 117:22 119:1 355:12 **develop** [1] 29:22 **developed** [1] 66:11 developments [1] 79:19 **devote** [1] 60:7 diagnosis [2] 48:20 270:18 diagnostic [2] 48:13,17 **difference** [1] 19:9 **different** [31] 19:16,23 20:21 22:1 28:10,25 31:6 51:15 55:9 58:17 60:15 61:6 62:4 69:15,20 71:18 77:13 101:22 123:6 176:22 190:22,24 191:6 210:21 284:21 332:20 347:17,21 348:3,17 366:17 **differently** [3] 60:6 61:4 210:18 **difficult** [1] 91:13 difficulties [1] 93:23 **difficulty** [1] 263:6 **dilemma** [1] 20:22 **diligent** [1] 189:3 diminished [1] 102:14 **direct** [9] 37:2 42:13,22 89:12,19 224:9 242:4 370:21 371:16 **directed** [3] 206:2 268:12 354:19 directing [1] 274:16 direction [5] 22:13,16 25:2 26:4 260:19 directive [2] 82:4,16 directly [12] 7:2 71:23 84:17 158:6,10,24 272:6 273:4,20,25 327:7,14 director [6] 4:4 58:22 77:23 85:11 284:22 310:2 **directors** [1] 32:20 **directory** [17] 176:19 276:6,16,18,22,25 279:13 279:23 282:11,24 283:16 307:19,24 308:17 309:12 309:20 319:24 disadvantage [2] 137:4 137:14 disagreement [4]

disappointment [1] 162:8 **disclosed** [3] 344:15 345:4 346:2 **disclosure** [8] 67:25 216:13 217:1,5 327:7,14 344:17 345:7 **discovered** [5] 117:21 165:11 182:5 195:15 362:1 **discovery** [1] 174:1 discrepancy [2] 20:11 24:20 discuss [11] 35:4,21 101:3 240:14 279:14 299:8 300:12.16 308:18 318:15 368:13 **discussed** [17] 78:24 79:2 81:7,22 112:14 136:5 215:25 300:5 303:8 318:7,19 322:8 330:14 339:9 342:1,7 369:12 **discussing** [2] 110:9 155:20 **discussion** [114] 3:17 23:1 49:14 65:17,20,25 79:7 99:21 109:3 110:20 110:25 111:2 112:17 115:4,11 117:9 119:18 132:9,17 136:14 138:18 139:2 143:20 145:2 150:10 170:12,15,17 171:1 188:17 196:8 197:18 202:19 207:2 216:3,17,19 217:6,10 227:8 240:9.17 241:12 247:25 248:25 249:24 250:3,11,14,21,22 251:4 251:6 258:21 261:5 262:21 263:4 264:22 265:2,4 279:17 285:5 286:15,16 288:1,12,20 290:5 296:10 300:7,8,10 300:19 301:11,15,17,20 304:17,19 305:22 306:23 318:5,18 319:9 320:19 321:15 322:16 323:16 324:2 328:1 331:1.4.11 331:20,25 332:20 333:11 337:6,9 339:16 342:10 342:14,16 343:21 345:6 345:10,12 346:9,12 352:10 353:14,18 355:23 **discussions** [35] 35:15 136:6 163:9 197:9,14

359:6

discussions [35] 35:15

41:8 79:12 109:6 112:2

136:6 163:9 197:9,14

204:23 205:9 206:18

208:10 209:3 210:11

252:2 274:23 289:20

299:4 301:6 302:2 303:19

305:12 325:12,17 344:12

344:14,23 345:2,25

346:15,23 347:3,6 371:22

disease [2] 281:4,5

disposal [2] 12:8,22

distance [1] 270:7

distinctly [2] 294:20,22

disturbing [1] 117:25

division [5] 1:15 31:3 176:20 276:20 320:2 **DM** [2] 339:3,23 **Doctors** [1] 1:9 document [15] 3:14 64:24 65:8 113:16 157:23 170:7 173:9,12 233:1 237:11 271:25 273:2,4 292:14 294:6

documentation [2] 19:4 19:22

doesn't [11] 15:19,20 68:3 78:4,6 104:22 160:9 170:3 177:18 219:22 262:9

dog [2] 304:11,14 **done** [64] 7:22 8:16 10:8 14:8 26:8 28:15 34:2 37:3 46:3 47:25 48:19 57:9 60:5 61:3 62:4 64:16 82:8 85:4.15 90:14 91:2 104:20 105:10 117:19 123:25 126:4 129:16 131:3 133:6 138:5 141:24 155:9 156:12 159:10,15 165:18 196:3 196:21 204:22,23 220:11 229:23 230:2 235:5 239:17 245:18 251:13 253:25 260:12 281:6 302:9 319:7.9 327:2 333:22 334:22 335:4,5,6 350:19 365:6 367:6,7,8

double [1] 175:25 **doubt** [1] 191:24 **down** [21] 6:8 30:23 40:1 67:14 99:16 101:20 113:22 117:20 125:24 159:20 165:9 173:25 174:4 259:8 285:12 286:6 308:9 316:6,16 321:3 353:7

Dr [78] 13:14,24 15:19 16:3.10.25 18:12.20 19:3 19:20,24 24:6 47:25 81:3 92:6,11,13,15 93:4 94:25 95:9 99:7,9,19,21,23 100:1,4,15 101:2,14,16 102:2 108:17,21,22 109:3 109:6 110:1,9,16,20 111:5,6,7,20,24 112:17 112:24 113:10 115:4,12 116:6 117:9 118:20 119:18 120:20 123:19 124:6 125:23 126:19 127:7,16 145:2 148:6,11 150:10,12 152:9 153:14 164:9 196:9 197:19 206:16 236:1,2 326:12 370:15

draft [26] 6:14 11:8 12:17 95:6 137:19 176:22 177:1 177:3 236:1 237:7 249:3 249:8 256:16,18 257:17 257:18,20 259:7 284:5 292:13 295:15 296:9 321:1 324:22 325:6 326:11

drafted [11] 166:15 167:18 179:21 185:15

219:20 233:6 261:14 268:21 312:9 315:7 340:6 drafter [1] 176:11 drafting [6] 5:3,18 190:13,16 191:12 274:20 **drive** [2] 4:20,23 **dropped** [2] 215:4,9 **ductal** [1] 114:22 due [4] 114:3 191:5 220:22 222:8 during [23] 34:8 54:17 60:12,19 66:21 74:7 77:9 77:10 99:24 111:25 112:21 150:4 153:13 166:14 168:19 224:24 230:1 274:21 292:11 304:15 318:7,19 335:5 **duty** [1] 206:3

-E-

e [9] 75:6 101:18 103:8 104:15 134:15 135:10 281:24 289:18 294:16 **e-mail** [64] 15:8 67:1,3 68:6 71:25 72:2,9,13,18 73:5 75:5 81:4 92:11 99:5,7,18,20 100:25 101:8,9 102:22 103:11

73:5 75:5 81:4 92:11 99:5,7,18,20 100:25 101:8,9 102:22 103:11 103:17,20 104:6 105:4 106:1 111:5 112:12 115:10 117:1 122:25 134:4 135:5 139:6 140:2 140:3,8 141:5 142:7 143:12 160:23 162:6 206:15 235:18 236:25 258:19 259:2,17 260:16 261:6 266:16,21 273:10 280:14 281:18 282:5,16 285:2 307:11 308:2,9 325:10 360:2

e-mailing [2] 92:13 101:16

e-mails [11] 3:12 102:5 102:18 103:1,13 104:17 104:22 106:7 110:1 135:6 141:9

early [16] 24:21 75:6 83:19 144:3 165:17 182:10,16 195:19 218:17 219:2 220:3 221:6 230:20 260:11 261:10 340:14

easily [1] 86:17

Eastern [267] 1:10 3:21 4:6,12 5:10,17 10:14 11:4 12:15 13:9 14:9,23 17:14 18:2,25 19:12 20:6 20:16,21 21:3,15 22:14 23:12,19,21 24:1,18 25:9 26:5,13,21 27:11,17,18 28:4,8 30:1 32:13,23 33:4 34:12 37:4 38:5,19 38:25 39:1,3,11,11,17 39:20 40:3,5 41:5,8 42:13,21 43:2 44:20 48:14 54:1,3 58:19 59:2 59:23 60:3 62:22 68:23 69:14.17.24 70:2 71:8.9 71:10 81:1 84:12,25

86:18 94:14,16 96:6 97:18 98:2 104:10 108:1 108:4 117:24 118:23 119:3 122:3 123:14 125:6 126:13 133:19 135:25 136:23 137:18,20 142:25 143:17 144:24 145:6,14 145:19.22 146:13 148:7 148:13,18 150:13 151:3 151:22 154:15 155:23 161:10,25 162:1,14,16 163:1,10 165:11,16,18 165:23 171:10,11 182:5 182:9,11,19 183:15 186:1 187:22,25 188:4,18 189:3 189:6,15,21,23 190:20 191:5,11,15 192:5 195:15 195:18,20 196:1,19 197:24 198:20 199:22 202:9,22 203:5,15 204:4 204:25 205:12,14,16 206:11,12 207:21 208:15 209:1 210:9 213:18,20 217:20 218:16,17 220:3 221:8 222:1.12 223:18 223:23 224:4,11 225:3 227:9,11,22 231:13 232:1 234:20 237:7 240:3 242:14 243:15 246:1 247:3,16 249:1 250:7 263:11,21 264:1 266:11 266:15 270:25 271:25 273:15 274:10 275:1 276:21 281:1 284:22 285:18 286:7,18 288:15 289:11 290:22 291:1,3 292:15 297:16 307:20 316:18 319:23 326:6 327:5,16,24 328:2,9 333:2,16 334:18 335:20 337:10 338:2 340:14 341:11,20,21 343:24 344:15 346:24 347:11 349:17 357:14.23 359:8 360:17 361:25 363:5 364:6 365:4,16,18 367:15 368:3,7,11 369:22 370:1 370:12,21 371:7,17

Eastern's [10] 276:6,16 276:18 279:12,23 282:11 307:19,24 308:17 309:12

edit [1] 294:18

edited [2] 185:16 311:6 editing [3] 245:19 296:3 311:5

editorial [1] 294:16 **edits** [7] 263:2 279:14 308:18 309:2,4,9 331:15

education [1] 114:23 **effect** [6] 75:11 82:21 155:25 176:3 192:23

371:19 **effectively** [1] 369:23 **effort** [2] 76:14 169:9

efforts [3] 15:14 68:4 99:11

eight [3] 34:4 116:15 271:5

either [16] 7:1 49:1 58:21 106:11 127:21 162:16

302:10,16,18 304:4

feeling [1] 220:14

felt [24] 26:19 37:18

52:13,21 53:18 74:10

199:21 202:8 205:12

298:22 311:16 316:25

357:17 364:25 368:9

few [8] 7:6 9:11 32:21

figure [6] 17:1 23:21

figured [1] 156:2

figures [2] 18:2,12

figuring [1] 356:18

file [93] 15:17 21:11 26:15

26:19,20 27:10,12,19

28:11,24 38:25 39:1

42:23 50:15,17,21 51:9

51:12.13.15.18 52:7.22

57:9,10 58:15,24 59:2,6

59:16 60:4,7,10,12 61:11

76:17 84:13 99:24 112:21

150:6 157:17 161:20,23

162:2,5 168:4 189:15,17

204:22 205:10,14 206:18

207:1 208:16,24,25 209:2

192:7.9 193:22 199:22

210:8,10 224:10 230:3

231:1 252:24,25 253:5

315:19 341:8 353:19

365:1 366:24 370:15

28:25 37:13,18 58:5

253:14.17 303:20 304:8

354:16 359:7 364:11,25

files [22] 23:7 24:24 26:7

59:12 60:8,13 64:1,3,8

63:8 64:14 74:3 76:1,4

53:16,18,20,24 55:11

127:24 128:2,9 155:24

370:16 371:9

268:12

206:3 222:3 227:12

137:3 197:24 198:1,19

fell [1] 144:11

164:9 176:17 206:10 242:3 306:18 343:11,12 354:20 356:21 365:13 **Ejeckam** [2] 13:24 15:19 electronic (4) 273:5 276:21,22,25 electronically [1] 316:10 **element** [1] 162:7 **Elizabeth** [1] 231:7 **Elliott** [1] 235:23 **embedded** [2] 139:23 140:1 **enable** [1] 153:22 encountered [3] 93:21 94:20 130:22 end [14] 7:13 36:24 47:7 50:8,11 74:20 101:1 102:17 105:17 106:9 163:23 222:15 243:13 338:8 **Ended** [1] 296:25 ends [4] 102:14 134:16 286:2 297:10 **engage** [3] 71:5 209:3 210:11 engaged [4] 161:24 247:16 253:16 321:18 **engagement** [1] 366:23 **ensure** [9] 62:7 85:25 88:10 143:15,16 202:12 267:12 337:11 338:6 **entire** [1] 245:7 **environment** [1] 173:23 **epithelium** [1] 114:22 **equipment** [1] 11:9 **ER** [5] 32:22 96:19 133:8 271:13 281:3 **ER/PR** [37] 10:19,20 27:1 48:19 61:21 74:6 78:14,24 79:8 80:24 81:23 96:20 99:8,11 108:9 121:23 130:13 139:20 165:12 179:8 182:6 196:3 205:15 227:24 234:16 242:11 243:13 270:3.4.17 278:17 285:23 286:9 297:17 333:18 337:4 366:19 err [1] 191:15 erroneous [8] 247:14 255:5,11 260:4 263:8 277:17 311:11 330:21 error [20] 16:8 48:17 174:15 179:23 180:8 183:7 190:9 305:1 345:8 349:21,25 351:4 352:8 353:11,25 355:2,10,12 355:19 361:19 errors [2] 48:14 358:25 essentially [1] 125:7

et [1] 1:9

etcetera [1] 279:5

evening[1] 316:3

ethics [2] 242:8 243:12

event [5] 9:12 208:1 209:18 213:8,18 events [2] 62:18 203:25 everybody [3] 79:18 89:20 90:2 **evidence** [7] 16:9 108:20 114:10 120:22 130:10,16 291:25 **Exact** [1] 278:23 **exactly** [7] 13:3 153:14 168:9,20 268:16 300:23 354:17 **Examination** [2] 2:3 3:3 **example** [15] 10:15 12:23 51:18 61:10 103:24 127:8,10 172:21 176:2 192:19 217:1 304:9 343:22 354:2 355:9 **examples** [2] 369:4,7 **except** [6] 91:16 102:11 204:17 338:4 365:20,23 **exception** [1] 358:23 exchange [13] 3:15 56:24 61:8 67:5 72:18 75:7 102:23 103:9 117:2 139:6 143:12 160:23 266:21 **executive** [20] 4:5,24 65:4,11,16 66:17,20 77:2 77:4,7,15 78:8,24 79:22 79:25 231:10 322:5 336:25 337:6 338:19 **exercise** [3] 350:14 357:2 357:5 **exhibit** [2] 72:16 281:17 exist [3] 104:13.22 170:3 **existed** [1] 368:18 **existence** [3] 217:23 314:2 321:23 **exists** [3] 309:12,15 310:2 **expect** [9] 57:4 67:24 73:6 95:21,23 122:17 131:7 149:12 329:12 **expected** [12] 12:1 45:11 87:9 132:6 149:13 163:6 165:16,18 166:21 182:11 183:2 195:20 **expecting** [8] 96:25 132:10 258:20 335:18 336:8,18 348:10,16 **expects** [3] 218:18 220:4 221:8 expeditious [1] 145:8 **experience** [2] 366:5 370:10 **experiences** [1] 67:8 **explain** [6] 14:4 183:3 184:15 330:8 354:8 **explained** [1] 278:25 **explanation** [2] 49:20 140:20 **explore** [2] 61:2 148:14 express [3] 325:21 326:22 371:14 expressed [4] 75:13 79:3

327:24 372:3 **expressing** [1] 371:18 **extensive** [1] 212:19 extensively [1] 59:9 extent [1] 306:11 external [30] 45:4 49:20 96:1 100:6 112:4,25 116:7,9 119:20 120:7 138:16,22 150:9,10 165:13 182:7 195:16.25 196:11,18 197:1,10 198:1 200:20 218:10 219:25 221:4 222:21 227:20 247:17 **extra** [3] 141:23 144:8 275:8 -F**face** [2] 126:11 210:16 **fact** [26] 14:12,14 92:10 106:6 141:1 160:6 178:1 178:16 180:12 187:19 191:5 194:2 196:17,22 197:2 207:20 215:18 217:10 222:17 223:12 224:14 259:9 262:5 292:17 329:21 353:9 factor [1] 14:19 **factors** [9] 64:9 149:12 349:19 351:2 352:9,21 353:9,24 355:1 **failed** [1] 114:8 **failure** [2] 113:24 114:2 fair [10] 25:11 56:19 58:16,21 115:12 125:21 191:3 213:23 267:14 341:22 **fairer** [2] 192:2,4 **fairly** [9] 63:17 74:24 85:19 101:10 116:7 123:24 127:6 130:19 164:19 **fall** [9] 34:9 42:3 60:13 60:19 334:22 335:5,6 348:12 366:22 false [4] 114:8,11 362:3 362:21 **familiar** [2] 233:21 315:19 **families** [6] 67:18 242:8 242:10 243:2 246:13 278:23

far [6] 40:13 107:16

faulty [1] 113:25

335:24

363:22

329:15,17

173:22 191:10 263:25

February [18] 154:11

161:21 164:15 168:8,17

189:13 214:15 215:3,9

feedback [5] 329:5,8,11

226:24 298:14 301:1

174:1,11 178:5,22 188:21

64:17 75:1,3 76:18 194:7 208:11 321:18 364:13 366:17 **final** [43] 50:6 163:7 176:18,21 177:2 178:15 182:12 189:13 195:22 218:19 219:15 220:6 221:9.13.17.21 222:19 223:12 227:21 228:7,23 260:10 278:13 285:4 286:14 288:9,11 292:7 292:23 294:8,12 297:9 297:10 302:11.19 308:11 313:8 321:2,6,9,19 **family** [6] 221:1 222:12 323:13 325:7 242:4 243:8,14 245:25 **finalize** [1] 85:13 **finalized** [1] 117:12 **finalyzing** [1] 334:23

finance [1] 353:16 **financial** [1] 211:9 **finding** [1] 95:3 **findings** [26] 43:9 95:12 95:21 96:1,4,9 98:5 100:5 110:4,5,22 112:3 115:13,23 119:20 120:4 120:6,6 121:21 122:8,15 131:6,25 138:16,22 364:2

fine [3] 175:8 228:12 354:10 **finished** [2] 195:10 335:3 **first** [33] 4:10 5:2 32:12 33:11 66:16 67:15 74:9 86:3,13 88:6 93:15 95:5 113:15 118:12 134:5 142:23 145:10 146:21 151:19 165:8,14 176:11 176:22 177:1 187:7 231:21 233:20 258:22 314:9,14 315:15 319:17 45:12 99:23 230:2 234:22

> **five** [4] 3:14 33:4 80:23 100:25

368:22

fix [2] 127:25 128:2 **fixation** [3] 114:13,16 114:17

flaws [1] 115:3 **flexibility** [2] 37:16 212:24

flight [1] 261:10 **flow** [1] 58:18

flowing [2] 62:9 358:5 **focus** [4] 43:8 112:7,10 147:5

focused [3] 140:24,25 300:19

Fog [1] 81:4 foggy [1] 73:17

follow [18] 68:23 69:3 69:24 70:3 71:2 108:19 109:8 110:2 111:6 136:10 138:3 144:24 148:22 163:1.10 169:16 222:16 241:12

follow-up [8] 43:7 68:10 68:13 81:5,16 196:6 205:11 274:16

followed [4] 69:11 207:7 225:22 229:4

following [23] 5:2 68:18 72:19 87:13 93:16 97:21 99:6,12 101:4 111:10 136:8,21 155:4 229:15 261:10 316:3 321:16,18 331:23 341:25 344:12 345:24 346:5

foregoing [1] 373:2 **forgotten** [1] 146:1 form [5] 30:2 156:24 197:9 256:16 347:20 **formal** [2] 61:11,15 format [2] 101:22 273:5

formulate [1] 28:5 **forth** [2] 104:9 168:5

forthcoming [1] 344:25 **forum** [1] 76:22

forward [21] 14:3,15 15:20 168:14 186:10 237:11 238:6 246:7 247:4 248:17 249:9 256:4,6,9 273:4,10 275:13,18 312:12 313:8 321:19

forwarded [18] 13:8 15:6 26:13 163:16 237:17 237:20 241:3 247:13 280:15 281:17,18 282:17 282:18 295:17 311:21 322:13 326:17,24

forwarding [1] 276:3 **found** [7] 11:25 57:11 95:19 111:7 137:13 195:11 269:16

four [9] 5:24 11:23 17:7 34:3 36:9 146:22,23 336:22 360:23

fourth [2] 11:7 33:14 **frame** [2] 14:7 33:22

Friday [10] 15:5,7 77:8 77:15 100:25 111:15,17 139:18 240:19 315:23

friend [5] 67:3,4,4,8 144:6

front[1] 18:22

full [6] 45:11 52:6 53:19 78:8 338:7 372:5

fully [3] 51:11 189:8 366:13

funds [1] 212:24 future [1] 62:18 FYI [2] 73:6 259:3

-G-

Gary [6] 231:9,15 275:13 275:14 278:20 279:8 gathered [1] 341:3 gathering [2] 39:7 206:4 gearing [1] 344:16 general [32] 21:6 25:8 71:1,11 74:3,17 79:7,22 95:3,11 96:4,5,9 98:5 100:5 104:4,15 110:5,21 112:3 114:7 119:20 120:6 121:21 122:15 131:6,24 193:20 216:7 222:10 302:4 364:2

generally [6] 76:4 82:23 83:19 130:15 176:10 345:18

generated [1] 231:6 George [2] 85:18 360:11 gift [1] 372:12

given [22] 22:13 26:4 98:22 100:20 109:18 116:8,13 122:16 168:8 203:8 260:15 265:14,20 266:11 285:6 289:12,17 320:4 332:23 350:9 351:20 353:15

giving [7] 19:5 97:6 137:19 260:19 313:13 320:15 352:16

global [2] 37:16 212:24 **go-forward** [2] 21:7,10

goal [1] 247:20

goes [12] 5:15 72:2 142:12 176:13,14 212:20 219:25 243:22 248:17 252:9 255:20 361:25

gone [9] 69:2 147:22

148:25 158:6,23 163:18 171:5 176:18 232:3

good [16] 3:6,6,9 57:11 64:16 68:3 107:6 123:25 124:3 144:6 195:3,4,6 211:8 212:7 280:4

gov.nl [2] 101:25 108:16 **government** [15] 60:21 103:20 117:25 119:3 146:12 198:11 200:5 212:15 213:2 220:20 222:6,12 252:7 326:2 339:14

government's [3] 103:8 220:25 233:24

greatly [36] 285:19,24 286:10,11,14,16 287:10 287:16,20,23 288:3,8,14 289:1 290:16,21 291:10 291:11 292:12 293:21 294:15 295:9,22 297:4 297:18 300:14 302:25 303:8 306:21 307:5,21 307:25 309:7,16 310:3 331:15

Griffiths [14] 57:18 58:1 58:5,9,12 59:18 62:21 179:22 253:13 337:22 340:6 360:2,9,22

grossing [1] 114:14 group [2] 73:5 158:18 guess [37] 7:12 33:1 41:3 41:22 53:4 55:13 60:1 62:8,17 67:15 69:22 79:9 96:3 138:3 173:23 178:9 183:2 184:20 187:6 189:23 199:20 202:7 211:1 246:5,25 254:8 296:22 299:3 306:8 313:4 313:4 316:25 319:6 321:16 334:8 353:15 368:1

-H-

half [1] 362:1 **hand** [3] 19:11 272:18 344:4

handle [1] 64:3 handled [2] 145:8 210:24 handling [9] 63:4 74:7 79:4 208:15,20 209:2 210:1,20 213:18

handwritten [3] 7:3 65:1,2

hanging [1] 148:1 Hanlon [2] 216:3 221:1 Hanlon's [1] 214:11

happening [9] 26:25 33:2 53:5 71:16 86:10 143:13 144:20 334:6 348:12

happy [1] 101:5 **hard** [10] 98:21 142:3 146:2,16 147:12 149:15 153:23 160:25 192:7 272:18 **head** [1] 304:10 heading [2] 255:4 283:4 headings [1] 113:22 headline [1] 360:19 heads [2] 90:1 139:17 health [309] 1:11,17 3:21 4:6,12 5:10,17 10:14 11:4 12:16 13:9 14:10 14:23 17:14 18:2 19:1

19:13 20:6,16,21 21:3

21:15 22:14 23:12,19,21

24:1,19 25:9 26:13,21 27:11,17,18 28:4,8 29:10 29:14,21 30:1 32:13,24 33:5 34:12 37:3,4,11 38:5,19,25 39:1,3,11,11 39:17,20,23 40:6,21 41:5 41:9 42:2,14,21 43:2 44:20 48:14 54:1,3 55:10 58:20 59:2,23 60:3,25 62:14,23,25 68:24 69:14 69:17,24 70:2,15 71:1,4

69:17,24 70:2,15 71:1,4 71:8,9,10,12,23 73:20 74:20,22,24 76:8,20 81:12,13,15,16 82:6,7 82:23 84:12,25 86:18 89:12 90:22 94:14,16 96:6 97:18 98:2 104:10

90.0 97.18 96.2 104.10 108:1,4 117:24 118:23 119:3 122:3 123:14 125:6 126:13 130:20,21,23 131:3,11,20 133:20 135:25 136:23 137:18,20 142:25 143:17 144:24

145:6,14,19,22 146:13 148:7,13,18 150:13 151:3 151:22 154:15 155:24 161:10,25 162:2,14,16 163:1,10 165:11,17,18 165:24 171:10,12 182:6 182:9,11,19 183:15 186:1 187:22,25 188:4,18 189:3

191:5,11,15 192:5 195:15 195:18,20 196:1,20 197:24 198:21 199:22 202:9,22 203:5,21 204:4 205:1,12,14,16 206:11 206:12 207:21 208:1,3,5

189:7,15,21,23 190:20

208:12,15 209:1,1,7,16 209:17,18,23,25 210:9 213:5,18,20 217:20 218:16,18 220:4 221:8

22:1,12 223:18,23 224:4 224:11 225:3 227:9,11 227:22 231:13,14 232:1 234:20 238:5 240:3

242:15 243:15 247:16 249:1 250:7 263:11,21 264:1 266:12,15 270:25

272:1 273:15 274:11 275:1 276:19 281:1 285:18 286:7,18 288:15 289:11 290:22 291:3

292:15 297:16 307:21 316:18 326:7 327:5,16 327:24 328:2,9 333:3,16 334:18 335:20 337:10

340:14 341:12,20,21 343:24 344:15 346:24 347:11 349:17 357:14,23 359:9 361:25 363:5 364:6

365:4,16,18 367:16 368:3

368:7,11 369:22 370:1 370:12,22 371:7,17

Health's [7] 26:6 40:3 203:15 246:1 247:3 276:21 319:24

hear [12] 75:12 124:5 165:13 175:10 209:10,15 293:2 296:8 327:5,10 346:4,12

heard [15] 292:10,19,25 293:18 294:3 295:4 296:14 313:21 327:12,23 354:14,17,20 371:13 373:5

hearing [2] 345:13,16 heated [2] 342:10,14 Heather [36] 99:24 134:5 231:12,18,25 232:17,19 233:1,8,11,16 235:18 245:10 249:1 250:22,24 251:4,10,18 252:3 260:17 263:12 273:20 274:10,17 274:18 275:7 278:15,22 279:18 285:5 292:14 315:22 325:11 334:2 370:14

Heather's [1] 111:5 held [1] 45:10 help [3] 119:21 137:6 252:16

helpful [5] 134:15 214:2 255:17 273:14 365:2

Hennebury [1] 1:9 Hennessey [1212] 2:2 3:3 3:7,8,12,25 4:8,16,22 5:6 5:12,16,20,25 6:5,9,13 6:24 7:14,24 8:4,8,14,23 9:3,13,20 10:4,25 11:5 11:15,19 12:5,9,14 13:1 13:10,15,19,25 14:5,17 14:25 15:11,16,22 16:12 16:18 17:2,10 18:4,14 18:18 19:6,25 20:12,17 20:23 21:9,16,21 22:3,7 22:11,18,22 23:4,14,23 24:8,13,22 25:11,15,21 26:2,16 27:7,16,24 28:6 29:12,19 30:4,10,14 31:9 31:14,24 32:6,9,16 33:7 33:19,24 34:16,20 35:1 35:8,18 36:1,4,6,10,17 37:1,10,24 38:3,11,16 38:21,24 39:9,19 40:4 40:10,15,20 41:2,12,16 41:20 42:7,18 43:13,22 44:2,8,16,25 45:16,20 46:2,10,21 47:1,11 48:8 48:15,23 49:6,16,22 50:3 50:10,14,18,22 51:2,7 51:10 52:2.10.15.20 53:3 53:8,14,25 54:11,16,21 55:6 56:4,8,15,22 57:7 57:17,23 58:3,11,25 59:7 59:17,25 60:18 61:14,24 62:11 63:11.21 64:2.7 64:23 65:5,19 66:4,13 66:19 67:6 68:7,12,19

69:5,12,21 70:8,14,19

71:20 72:4,10,21 73:2

73:13 74:1,16 75:14,18

76:2,16 77:6,20,25 78:5 78:15.20 79:5,11,15,20 80:5,12,16 81:9,24 82:9 82:14,22 83:2,9,12,25 84:4,10,18,23 85:6,20 86:6,16 87:2,5,10,14 88:18 89:4,10,23 90:4,8 90:16,21 91:6,12,20 92:7 92:19 93:1,5,10,22 94:6 94:12,22 95:13,14 96:2 96:11,16 97:3,8,13,25 98:6,19 99:1,22 100:7 100:16,22 101:7,12 102:7 102:19 103:3,10,13,16 104:3,14 105:1,6,11 106:3,10,13,18,22 107:4 107:10,14,19,24 108:5 108:10,24 109:4,10,15 109:19,23 110:6,11,23 111:4,12,16,22 112:5,11 112:19,24 113:1,5,12,17 115:7,15,20 116:1,5,12 116:17,19,23 117:4,13 118:8,11,16,21 119:4,9 119:15.22 120:8.13.17 121:3,8,10,14,18,24 122:12,18 123:2,5,10,15 123:21 124:2,12,21 125:3 125:9,13,18,22 126:8,14 126:21 127:15 128:6,12 129:5,14,21 130:3,7,14 131:1,13,22 132:8,16,25 133:13,18 134:1,7,12,18 135:1,7,13,16,21 136:1 136:7,12,19 137:1,9,16 137:25 138:9,17,24 139:8 139:14,25 140:12,21 141:10,17 142:8,18,20 143:2,10 144:2,12,21 145:1,9,18 146:5,7,18 147:2,8,14,19 148:2,9 148:16 149:3,16 150:1 150:15,24 151:7,11,16 151:20 152:8,13,22 153:4 153:12,19,25 154:9,13 154:20 155:2,7,13,18 156:5,17 157:5,15,22 158:3,13,19 159:4,11,17 160:14 161:2,8,13,19,22 162:4,10,23 163:4,12,20 164:2,7,16,25 165:4,22 166:8,11,23 167:3,9,24 168:11,18 169:5,14,19 169:25 170:4,8,16,25 171:7,17,20,24 172:3,10 172:15,18 173:1,5,11,16 174:8,12,19 175:6,7,13 175:16,19,24 176:9 177:4 177:9,15 178:2,7,13,14 178:23 179:2,9,16,24 180:5,9,14,22 181:2,6 181:14,18,22 182:17 183:5,13,19 184:4,12,16 185:4,8,12,18,24 186:5 186:7,12,17,22 187:10 187:15,20 188:6,12,25 189:11,22 190:3,8,15 191:8,21 192:3,20,25 193:5,10,17 194:4,13 195:4,5,12 196:4,12 197:4,12,22 198:6,13,17 199:4,10,14,19 200:3,6

200:10,15,22 201:1,8,14

201:20,25 202:6,15,18 203:2,12,18 204:1,6,13 204:19 205:4,8,22 206:6 206:17,24 207:12,17,22 208:4,9,22 209:6,12,20 210:2,7,25 211:6,12,22 212:2,11 213:9,15,22 214:3,6,12,17,22 215:6 215:10,15,22 216:1,14 216:18 217:3,12,16,25 218:12 219:3,9,14 221:14 221:19,25 222:9,15,18 222:22 223:3,10,19,24 224:5,16,23 225:2,14,18 225:24 226:7,15,21 227:6 227:25 228:8,13,25 229:6 229:17,22 230:7,14,18 231:4,13,24 232:8,12,16 233:10,15,22 234:1,11 235:1,7,11,18,20 236:5 236:10,14,21 237:2,13 237:18 238:3,12,18,24 239:3,8,13,18,23 240:6 240:11,16 241:11,16,23 242:19.23 243:4.9.18 244:1,6,11,15,20,25 245:4,8,21 246:4,8,16 246:20,24 247:6,10 248:3 248:7,13,20 249:5,11,15 249:22 250:4,10,15,20 251:5,11,22 252:1,13,21 253:3,12,22 254:2,9,14 254:17.22 255:7.13.21 256:1,5,12,17,22 257:5 257:10,19,23 258:2,7,11 258:18 259:6,24 260:18 260:22 261:4,15,20 262:2 262:6,10,18 263:9,19,24 264:6,12,19,25 265:9,16 265:21 266:2,6,13,23 267:2,7,17,24 268:3,8 268:13,18,22 269:3,21 270:21 271:3,15,23 272:7 272:13,17,23 273:7,12 273:21 274:2,12,19,24 275:15,24 276:7,11,17 277:1,12,19,24 278:6,10 279:19 280:1,13,17 281:9 281:13,20 282:1,6,13,20 283:1,5,9,17,22 284:2,6 284:11,16,23 285:2,9,15 285:20 286:3,13,21,24 287:5,12,21 288:4,10,22 289:2,9,16,21 290:3,13 290:17,23 291:5,12,19 292:20,22 293:4,8,12,16 293:24 294:7,13,21,25 295:3,6,11,18,25 296:6 296:13,17,21 297:1,5,13 297:20 298:1,6,10,15,20 299:2,10,18,24 300:9,13 300:17,22 301:2,8,14,19 301:24 302:6,14 303:2 303:10,15,23 304:3,12 304:20,24 305:2,5,9,15 305:19,23 306:4,13,22 307:3,9,12,16 308:1,6 308:12,21 309:1,5,11,14 309:21 310:1,7,11,15,19 311:1,7,13,18,23 312:1 312:3,7,13,17,24 313:3 313:7,14,18,23 314:3,7 314:11,16,20,25 315:5

315:14 316:15,22 317:2 317:7,12,17,22 318:2,12 318:16,24 319:5,14,20 319:25 320:5,9,14,20,25 321:8.12.13.24 322:4.10 322:18,22 323:3,9,14,21 323:25 324:5,12,20 325:5 325:14.24 326:9.18.25 327:9,15,19,25 328:12 328:18,22 329:1,7,14,23 330:1,6,16,23 331:3,12 331:17,24 332:8,12,17 332:25 333:7,13,20,25 334:7,20 335:14,21 336:4 336:9,14,19 337:1,8,17 337:23 338:9,15,20 339:6 339:11,18,24 340:4,8,18 340:25 341:5,9,16 342:2 342:8,15,19,25 343:5,10 343:17,25 344:9,18 345:1 345:9,15,19,23 346:8,14 346:18,22 347:2,7,13,24 348:6,13,19 349:4,8,14 350:3,11,17,23 351:3,17 351:22 352:2.13.22 353:2 353:13 354:4,13,22 355:3 355:15,22 356:3,9,14,23 357:3,8,12,20 358:2,7 358:19 359:4,14,19,23 360:5,25 361:6,8,15,21 362:6,10,17,25 363:3,6 363:10,15,20 364:4,9,18 364:22 365:14,22 366:9 366:14,21 367:4,17,24 368:8,14,25 369:6,13,17 369:24 370:6,13,24 371:4 371:20 372:2 **hereby** [1] 373:2 141:14,20 235:25 259:18 267:10 270:5

hesitate [1] 236:3

Hi [9] 85:18 92:14 99:8

high [3] 72:24 198:10 200:9

higher [1] 16:22 **highlight** [2] 260:14 277:10

highlights [1] 151:17 **hindsight** [5] 14:18 62:3

62:16 63:6 172:12 **hits** [1] 210:16

home [1] 316:2

homes [1] 135:9 **homes/St**[1] 133:23

honestly [2] 175:10 305:24

Honourable [2] 1:3 373:6

hope [2] 91:21 267:10 **hoped** [1] 90:10 **hopefully** [1] 97:17

hopes [1] 316:16 Hormone [2] 1:2 373:4

Hospital [2] 45:7 220:13 hospitals [2] 17:16 32:15

house [38] 52:5 54:17 55:2,14,16,25 60:14

76:21 83:15,17,23 85:7 85:9 86:2,25 87:23 88:12 89:22 90:15 91:3 93:12 95:6 97:22 119:14 142:13 142:16 150:5 154:1.4 158:18 160:11 172:23 187:23 229:24,24 344:3 360:14 367:7

Humphries [12] 276:4 276:10,12 279:11 281:25 282:5.19.23 283:15 307:11,23 308:16

hundreds [1] 67:17 **Hynes** [12] 59:4,4 65:1 72:25 78:3 80:8,22 336:24 338:25 343:2,13 343:15

-I-

idea [3] 82:7 304:7 329:21

identified [21] 13:24 48:12 100:12 118:5.15 121:2 122:5 126:12 127:12 128:23 147:17 149:1,5 151:24 152:25 159:25 242:3,16 243:7 353:3 361:13

identify [8] 85:8 96:21 97:19 118:23 119:21,25 122:20 156:21

identifying [3] 117:17 160:25 362:15

IHC [2] 114:25 115:1 **illuminate** [1] 150:11 **immediate** [1] 87:24 immediately 61 117:22 165:10 182:4 195:14 219:24 291:3

impact [1] 67:17 **impacted** [18] 17:24 33:18 43:5,12 44:7,19 60:8 133:9 278:16 281:2 285:8,19 286:8 288:18 289:14 290:2 297:16 307:21

implement [7] 128:24 129:18 148:19 150:21 151:4 156:7 225:5

implementation [2] 188:11,23

implemented [59] 150:19 152:7,18 153:11 156:11 165:15,21 166:2 166:4,17,21 167:6,13,21 167:23 168:5,6,24,24 170:24 171:6,6 172:24 182:8,15,25 183:10 186:11,16,21,25 187:4,9 188:5 195:17 197:25 212:15 218:15 219:1 220:2 221:6 224:22 225:6 225:12 226:4,10 227:5 228:5,21 247:20 248:2 248:19 254:16 255:2 257:4 261:3 278:3 332:11 340:13

implementing [11]

149:7 152:1 153:17 156:18 171:11 183:16 188:14 189:4 199:23 202:9 225:4

import [1] 57:6 **importance** [1] 114:25 **important** [10] 14:14 60:10 86:4,7 127:6 128:9 246:14 247:2,7 298:22

imprecise [1] 358:25 **impression** [11] 119:19 121:1,5 196:7,16 197:1 197:5,10,23 254:20 351:15

improve [2] 368:1,1 improvement [2] 211:13,17

improving [1] 38:10 in-person [1] 328:11 **inaccurate** [2] 258:17 311:16

inadequate [2] 114:13 114:17

inappropriate [1] $11\bar{4}:\bar{2}1$

inclined [2] 98:20 264:8 include [8] 243:16 244:4 245:7 275:7 319:13 324:18 351:9 354:3

included [19] 14:18 17:9 17:14 18:3 115:4 119:7 133:5 149:18 160:12 164:23 179:20 203:9 244:4,18 246:17,19 247:4 247:14 270:11

includes [5] 36:9 102:1 134:24 244:14 339:5

including [6] 42:12 72:25 114:4 220:10 243:17 266:10

inconsistent [3] 118:7 153:2 160:2

incorporate [1] 31:20 **incorporated** [3] 143:18 233:5 257:16

incorrectly [1] 180:21 **increase** [1] 73:18 Independent [1] 3:19

index [2] 33:1,3

indicate [11] 44:5 100:11 123:24 158:11 234:5 257:3 260:25 273:18 279:11 306:18 326:5

indicated [30] 4:3 11:24 19:17 108:20 127:21 129:11 132:10 135:14 146:10 148:25 164:14 167:15 175:16 176:4,7 179:13 198:9 200:4 235:4 237:5 249:8 274:6 278:19 279:17 294:2 312:19 325:25 328:17 337:4 361:3

indicates [12] 32:13,19 45:3 47:7 75:8 99:17 108:17 123:18 162:7

269:12 275:5 340:11 **indicating** [10] 99:25 119:1 146:14 182:14,24 238:9 257:14 259:3 278:13 292:7

indication [2] 146:21 361:18

individual [8] 70:3 71:2 71:10,13 190:20,22 230:24 338:4

individuals [12] 17:23 33:17 43:4 63:5 64:9 99:12,13,15 191:7 296:23 297:11 338:6

influence [1] 215:19 **info**[1] 273:19

inform [3] 56:13 57:5 136:4

informal [1] 83:4 **information** [259] 11:8 12:12,13,15,22 13:8 14:22 16:11 18:19,22,25 19:11,12 23:24 24:2,18 25:20,25 26:12,15 28:4 28:8,17,19 29:22 30:2 31:19,20 37:22 38:5,15 38:17,18 39:2 41:24 42:14 45:14.25 47:18.21 47:23 48:5 49:5,11 51:14 56:24 60:24 61:8,10 62:8 67:21 69:2 71:1,3 76:8 79:14 84:13 86:11 92:18 94:9,10 95:13,16,22 97:12,15 100:10,15 101:5 102:1,15 103:5,18 104:10 105:4 107:15 109:20 110:16 117:7 118:20 120:19 122:2 130:23 131:10,12,19,21,24 133:16,19 134:11,16 135:9 138:7,11 139:1 140:25 143:17 149:13 151:22 153:21 154:5 160:16,19 164:8 165:20 165:23 172:8 173:14 186:10 190:17,25 191:4 192:1 197:6.17 199:2 202:22 205:20 206:4,14 207:4 213:20 216:9,11 216:12,23,25 217:17,19 218:1 223:18,21 231:1 232:18,19,20,25 233:2 234:25 236:8,15 237:6 237:19,25 238:1,22 240:18,22 241:2,21 243:24 245:10,13,15 246:11,15,17,19 247:3,8 248:21,24 252:9 254:21 255:25 260:8 261:8 263:11,12,13,25 264:1 264:14,15,17 265:17 266:11,14,18 267:13,16 268:2 270:19,22,23 271:6 271:25 272:5 273:15 275:6 279:5 286:17 288:15 289:11,17,17 290:4,7 298:23 299:6 303:18 304:22 311:17

315:22.24 316:2.17.20

325:16,21,22,23 326:8

317:1,6,11,20 318:1

326:10,12,16,22,23 328:7 333:2,9 334:1,11,18 335:22 340:21 341:2 343:9,21 344:24 345:3 346:10 347:16.17 348:20 348:21 349:8,12,15 350:6 352:16 353:22 354:1,12 357:13.23 358:5 359:1 367:3 368:10 370:12,16 370:17 informed [4] 57:14

224:13,17 366:13

initial [4] 279:1 281:4 304:15 359:6

initiate [2] 278:21 279:6 initiated [1] 280:25 **initiation** [1] 85:4 initiative [3] 98:4,9,17

input [3] 261:19,21 293:22

inquire [1] 36:23 **inquiries** [12] 37:6 70:21 70:24 73:7,19 74:25 75:20 145:15 148:6 155:22 161:5,10

inquiry [12] 1:1 46:7 69:23,25 70:11,20,23 71:4,7 206:23 373:4,7

inserted [5] 165:14 244:7 244:10 285:25 290:16

institute [2] 45:5 86:22

instruct [2] 288:25 289:3 instructed [3] 23:3,5,11

instruction [2] 21:20 26:10

instructions [1] 266:9 **Integrated** [2] 1:10,17 intended [3] 119:12

158:17 361:12 intent [1] 255:15 intention [1] 246:12

interest [2] 55:22 355:9

interested [4] 202:16 317:1,5 358:18

interfere [1] 210:5 interim [1] 87:24

internal [9] 54:13 60:23 114:7,19 129:16 130:9 131:4 212:16,22

internally [3] 55:3 212:21 315:9

interpret [6] 88:16 184:2 220:17 288:17 289:13

interpretation [6] 53:4 115:1 128:21 190:24 263:15 270:23

interpreted [1] 91:14 interpreting [3] 23:17 89:17 127:14

interrelated [1] 156:16 **interrupted** [1] 129:8 interview [3] 47:25 81:3 286:23

interviews [1] 75:2 **introduced** [1] 60:20

introducing [1] 120:1 **introduction** [1] 275:10 involve [2] 252:20 254:7

involved [35] 5:3 15:17 27:13,22 28:11 38:10 51:15,19 54:12,25 55:3 57:21 58:10 59:5.9.11 59:16 60:4 61:5 74:14

83:22 164:14 189:15,17 191:14 192:8 203:10 222:13 341:10 346:23 347:3 356:2 365:12

367:18 371:7

involvement [10] 27:11 83:11,13 136:18 161:20 230:6,8 315:15 341:6,7

involves [1] 133:10 **involving** [1] 367:13

issue [100] 3:18 10:2,5 13:23,23 14:12,13 15:5 15:19 29:8 38:15,23 47:19 48:11,12 51:25 52:4 55:5 61:21 62:14 63:20 65:13,18,21 66:9 66:9,17 67:9 68:11,13 68:22.24 69:6.11.14 71:4 74:6,8,9,14 75:9 76:10 76:14 78:7,14,17,25 79:4 79:8,9,19 80:9,13 81:5,8 81:11,21 86:14 103:15 108:9 110:13 117:17 130:13 136:18 143:9

147:13,18 162:12 171:18 179:8 182:2 192:14 200:4 206:13 224:10 230:6,8 247:10 261:1 262:13 287:4.10 288:21 289:7 299:8 300:5 301:12,12 330:13 341:19 344:17 360:9 361:3,12,22 362:16

issues [24] 10:7 34:10 62:25 63:3,16 70:1 73:25 74:2 78:10 81:2 85:8 96:21 97:1,19 151:1,3,6 151:10 153:9 345:14 346:13 366:13 368:18 369:9

364:21 366:20 368:5

371:3

item [2] 80:10,17 itself [3] 210:5 232:17 248:21

-J-

Jane [1] 1:9 **January** [6] 143:23 162:22 163:7,10,23 184:11

January/February [2] 287:14 298:12

Jennifer [1] 1:15 **job** [5] 25:4 64:16 211:8 212:7 357:19

John [7] 6:10 81:4,5 142:6 155:9 253:15 338:25

John's [18] 17:16 26:22 32:14 36:15 144:16 195:21 196:23 198:4 200:1 202:13 221:9 223:15 227:1.15 229:12 271:21 373:8,11

joined [1] 334:25 **Josephine** [1] 231:9 judgment [1] 190:10 Judy [2] 373:2,13 July [9] 3:24 4:11 12:23 13:7,22 33:10 54:3 75:6 142:24

jumping [1] 168:4 **June** [2] 242:8 243:12 jurisdiction [1] 40:3 **Justice** [2] 1:3 373:6

-K-

Kara [1] 1:9 **keen** [2] 22:12 267:15 **keep** [5] 7:8 74:15 76:14 102:13 207:20

keeping [2] 81:1 82:10 kept [2] 81:14 319:23 **key** [14] 27:12 63:19 125:7,16 149:5,10 154:2 154:6 182:3 195:12 212:4

219:23 227:17 360:16 **kin** [1] 242:13

kind [5] 75:12 89:2 124:1 206:14 355:21

kinds [2] 127:8 128:3 knew [12] 9:18 14:25 15:1.4 61:10 97:16 130:15 166:2 171:9 183:18,20 343:6

knowing [3] 91:9 202:16 279:3

knowledge [19] 45:13 55:5 71:15 75:17,22 138:2 170:14 201:18,23 205:13 215:18 221:20 233:13,16 261:3 271:12 314:1,4 324:11

known [3] 127:17 189:1 278:24

-L-

lab [2] 229:8 254:25 laboratories [1] 114:1 laboratory [7] 32:20 45:9 96:20 116:10 203:10 247:18.21

Labrador [14] 241:6 260:13 261:11 267:5.11 270:8,24 271:10 272:14 316:4,4 331:7 373:8,11

Labrador-Grenfell [1] 1:16

lack [1] 114:3 Laing [1] 1:9 **Lancaster** [1] 144:7 lapse [1] 98:22

larger [1] 63:3 **last** [20] 4:7 45:3 47:21

47:24 65:10 75:6 77:15 89:7 171:17 212:16 239:7 239:16 275:8 287:14.15 287:19.22 288:1 312:18 317:15

late [19] 3:24 22:8 40:16 40:19 41:1 42:3 195:23 218:20 220:7 221:1.10 229:3,16 240:24 248:12 262:20 355:5 363:19 368:23

latest [6] 23:18,21 24:6 61:9 79:19 139:21

launched [1] 33:5 law [3] 217:7 294:17 305:1

lawsuit [4] 309:8 310:5 310:18,23

lead [4] 110:15 127:9,22 128:4

learn [3] 40:11 184:22 318:25

learned [7] 40:14,21 62:17 74:9 163:25 169:7 321:25

learning [1] 45:23 least [6] 15:1 184:22 213:14 252:2 281:16 303:7

leave [7] 88:4 143:14 177:23 252:12 254:20,23 312:8

leaving [1] 324:10 **left** [10] 5:1 119:19 120:25 174:1.13 236:1 261:10 312:2 316:3 324:14

legal [5] 220:22 222:8 278:21 280:25 328:10

legislation [1] 203:8 length [1] 34:7 lengthy [1] 130:19 lens [1] 31:17

less [3] 92:12 142:1,1

lesson [1] 62:17 **letter** [4] 89:16 102:16 233:22 291:18

letters [5] 33:15,15 43:2 44:7,11

level [4] 67:25 188:17 202:12 227:8

Lewis [2] 260:15 280:25 **Lewis's** [1] 285:14 **light** [7] 95:22 97:1

121:22 148:24 160:13 200:20 286:10 likelihood [1] 149:24

likely [12] 9:11 114:3 124:6 142:2 195:23 218:20 220:7 221:10 259:4 275:20 278:21 280:21

limited [1] 213:19

line [8] 47:19 98:25 153:23 160:25 162:15 168:14 274:8.13

lines [4] 211:2 212:4 327:23 345:8

link [1] 63:7

list [9] 85:10.13 115:2 136:22 137:6 154:5 187:6 187:8 243:17

listed [2] 74:5 296:23 **listing** [1] 336:5

lists [1] 85:12

literally [1] 347:25 **litigation** [5] 214:4

215:18 217:11,15,23 **live** [3] 43:9 173:23 313:4

lives [1] 144:7

loading [1] 62:19

long-term [3] 241:1 252:25 315:20

longer [10] 35:13 104:2 104:13 105:5 108:14 134:22 160:6,8 162:16 164:23

look [69] 5:9,23 10:12,16 12:21 16:1 17:6,25 32:6 32:25 33:10 43:14 58:9 60:1 61:20 64:20 66:25 83:8 88:2 92:3 99:4 101:6 105:8 108:13 116:15 132:20 133:25 139:5 157:21 160:3 176:22 177:2 182:1 193:11 198:7 199:2 200:25 201:2,3,12 205:19 210:17,20 231:3 233:19 235:17 236:24 238:9 239:19 243:21 255:11 266:20 269:17 276:2 280:22 281:23 285:1 287:25 291:17,25 304:9 336:22 337:20 352:8 353:11 358:11 360:1,20 362:9

looked [9] 16:2 195:12 235:8 280:14 285:3 347:20 349:1 352:4 353:16

looking [26] 16:19 61:4 69:2 70:25 74:14 95:12 95:15 96:18 117:7 120:23 147:22 173:4 174:22 195:9,10 199:8 201:24 202:2 206:14 230:25 232:24 234:24 247:24 285:7 326:2 364:1

looks [2] 126:11 310:20 loop[1] 81:2 losing [2] 228:10,14 **low** [2] 74:15 139:22 **LUNCH** (1) 194:24 **luncheon** [1] 194:17

-M-

MacDonald 61 47:9 49:2 72:1,3,5,9

magnitude [1] 63:18 **mail** 171 75:7 101:19 103:9 134:16 135:11 281:25 289:19

mails (1) 104:16

main [4] 58:10,12 109:9 160:5

maintain [1] 60:24 maintenance [2] 11:11 12:19

Majesty [1] 1:8 **major** [10] 57:8 157:11 203:21,24 208:1 209:17 240:25 252:24 253:17

majority [3] 183:25 184:9 238:15

makes [4] 152:16 202:24 284:20 352:25

manage [3] 64:17 331:6 364:12

managed [1] 162:5 management [1] 51:24 **managing** [9] 37:13 38:25 60:9 162:2 198:21 199:22 205:14 210:10 364:12

manner [1] 145:8 **March** [16] 175:12,22 179:21,25 180:12,18,23 181:5,11,17 182:13,20 184:11 189:12 195:10 196:25

Margaret [1] 373:6 **Marilyn** [12] 231:15 233:4 234:5,14,17 235:4 248:22 259:18 270:5 274:9 279:10 282:17

Mark [2] 1:14 74:7

material [4] 20:8 290:21 291:1,2

materials [3] 39:4 253:8 364:16

mathematical 121 349:18 350:18

matter [20] 3:17 5:4 27:10 37:9 52:18 53:2 53:13 54:20 61:6 70:25 76:20 81:16,18 83:11 112:14 205:15 208:20 214:5 234:22 373:3

matters [6] 54:15 64:6 73:20 76:8 80:1 81:13

Matthews [2] 46:18 231:8

may [101] 1:4 6:16 7:6 19:10 28:16 30:17 31:17 32:2 33:2 35:19 41:1,24 49:7,13 54:5,8 55:15,18 55:21 58:4 61:22 73:14 73:15,18 93:23 94:13 95:19 96:21 102:8 104:12 104:23 117:21 118:6 127:5,5 128:23 142:13 143:1 145:2 153:1 160:1 168:13 169:6 176:21 177:2,2,7,7,19,19,25

178:3 184:25 190:19,24 194:21 195:23 197:2,16 212:20 216:9 218:20 219:19 220:7,8 221:3,11 222:15 223:1 224:6,24 225:17 229:4,16 233:24 239:10,16,17,24 241:8 241:15 245:18 248:12 260:14 272:24 289:25 291:23 317:16 319:1 322:1 326:23 355:4,23 360:11,17 368:21 370:22 371:16 372:3 373:5,12

McCormack [85] 231:15 232:6 233:4 234:5 234:14 237:1,12 238:1 241:3 248:22 249:18 250:6,9,14 251:2,2,9,18 251:20,23 252:8 253:15 253:18,20 255:18 257:16 257:16 259:18 260:20 261:8 262:16 263:14 264:4,18,23 265:3,5 266:18,22 267:1,14 269:5 270:5 271:7 272:5,9 273:14 274:9,17,20 275:4 275:21 278:4 279:16 286:15 288:12,21 290:10 292:6,16 293:11 294:9 297:25 298:5 299:9.12 299:15,21 300:5,7 301:7 302:4,24 303:7 305:5,8 306:10,18,24 308:11 312:18 329:2 330:14 331:2 332:6

McCormack's [3] 272:2 289:18 332:15

mean [79] 6:10 19:9 23:17 25:5 26:3,19 37:11 37:15 42:19 60:6,22 66:20 70:13,23 73:16 74:18,18,23 76:18 79:23 85:7 107:15 128:19 130:8 131:2,4 138:25 139:23 149:10 151:6,10,21 154:2 156:14 161:25 162:11 173:20,20,22 182:20 187:1,21 191:18 192:5 198:19 199:20 202:24 204:20,22 205:12 206:23 207:25 208:5,11,14,23 210:16,21 212:3 227:9 228:12 231:19,22,25 265:1 276:15 290:4 313:6 315:6 334:5 349:5,17 352:23 354:6,14 367:5 368:15 370:7 371:5

meaning [1] 3:21

means [6] 66:3 139:24 140:1 177:1 204:21 373:10

meant [1] 88:17 **meantime** [2] 87:23 197:8

measures [4] 26:21 96:5 340:16,23

media [23] 34:15 48:12 55:22 73:7,19 74:25 75:20,23 76:7 81:12 139:18 230:23 260:15 314:15 344:20 361:10,14 361:16 362:5,16,24

232:22 288:16

meet [2] 66:21 77:8 meeting [53] 13:13 16:3 19:3 20:1,2 54:8 61:17 65:12,16 66:8,18 77:3 77:15 87:21 95:8 138:3 155:4 271:8 323:1.4.20 323:22 324:1 335:1,24 336:25 337:7 338:19 339:25 341:11.15.17 342:1,4,7,20 343:7,16 344:13 345:24 346:5 348:21,22 360:16 367:12 367:19,20,23,25 368:17 368:21 369:8,12

meetings [22] 53:24 54:1 54:2,7 55:3 59:12 65:4 77:9,11,24 79:12,22,24 80:4,9 253:7 304:16 364:21 365:3,13,15,18

meets [2] 77:5,8

member [4] 56:12 242:5 243:8,14

members [2] 1:12 245:25

303:14

224:8 354:2

message [19] 89:8,11 107:11,13,25 108:14 139:23 140:2,10,10,11 141:15 227:17

messages [14] 100:9 103:23 106:12,14,19 154:2 182:3 195:12

met [7] 65:9 287:13 298:11,14 300:24 323:16

216:3

middle [2] 67:14 128:10 might [14] 28:9 48:17 91:1 102:13 127:7 210:17 246:14 252:16 255:10,17

Mills [1] 1:8 mind [9] 84:6 104:24 105:2 156:10 191:24

minds [1] 31:2 minimize [3] 118:6 153:2 160:1

363:13,25

medical [4] 1:14 67:22

memory [3] 73:16 84:9

mentioned [3] 43:16

90:7,9 91:17,18,21 107:9

108:3 125:7,16 142:14 219:23 360:16

messaging [8] 100:9 106:17,23 107:2,3,7 108:8 154:7

360:12

method [4] 114:5 165:11 182:6 195:15

Michelle [2] 214:11

mid [2] 142:24 184:11 355:19 356:1,2 359:1

266:9 351:25 352:4 358:6

minimized [1] 75:11 minister [190] 7:17 9:15 10:7,9 14:15 15:24 20:4 24:16 25:3 34:19 46:6,8 51:17,19 55:7,9,10,12 55:12,18,23 57:9,13 59:10 68:6,14 69:7,11 71:22 72:25 74:18,21 78:3,6,8,11,13,16 81:17 85:1.13 86:1.4 87:22 88:10 89:19 91:1,1,4 93:2,12 94:19 95:4,8,18 95:24,25 97:21 98:17 119:13 132:5 136:14 137:18,23 138:14,14,19 142:2,12 146:1,15 147:11 149:14,23 150:5 153:19 153:22 154:1,6,14,22 158:22,24 160:10 161:1 166:24 171:19 172:4,5 172:13,22 173:4,6,7 176:15 178:16,17 179:5 181:12 189:24 190:6 191:1 193:14,19,20,21 194:5 199:3 201:9 204:10 204:12,18,21,24,24,25 205:7.9.10.21 206:5.10 206:19,20 207:2,3,11,15 209:19 213:21 229:15 241:6 256:18 260:13 261:11 296:9 314:1,4 315:4 316:6,25 317:5,15 318:6,15,18 319:10 320:4 320:10,13,16,19,23 321:2 321:4,7,10,15,20,22,25 322:14 323:6 324:9,13 324:22 325:2,7 331:8 335:25 339:3,23 341:11 341:22 343:22 346:1,1

367:6,14 371:22 minister's [21] 14:16 21:1 70:22 73:19 86:8 86:25 98:12 143:18 158:18 172:8 173:19 177:17 317:10,13 319:12 342:11.20.23 343:1 344:6 347:14

348:23 359:7 360:3.12

365:7,15 366:6,7,15,16

ministerial [1] 181:24 ministers [9] 61:23 62:2 75:2,22,25 76:5,12,19 76:22

minute [7] 101:18,24 102:6 106:8 134:22 224:10 269:18

minutes [11] 55:19 77:2 80:3,20 92:12,12 105:20 234:22 282:9,19 284:21

misgivings [3] 191:3,10 191:19

misinterpreted [1] 28:17

miss [1] 265:22 **missed** [3] 9:1 145:10 293:25

missing [3] 103:14 104:16 225:15

mistakes [1] 361:4

misspelling [1] 309:7 **mistake** [3] 67:16 287:13 311:6

misunderstanding [1] 225:19

misunderstood [2] 225:10,17

mix-up [1] 140:7 **Moira** [12] 2:2 3:3 6:9 53:12 87:1 99:8 231:13 235:25 267:10 282:12 292:22 313:7

moment [3] 10:16,21 228:10

Monday [15] 101:4 108:19 111:7,11,24 117:9 143:13,15 237:8,10 240:22,23 315:25 316:1 360:15

monitoring [8] 51:24 52:3 211:3,8,14,19 212:5 212:7

month [11] 86:3 88:12 95:5 146:6,14 147:6,22 147:24 153:20 159:2 168:13

monthly [1] 61:17 **months** [11] 32:21 33:3 33:4,6 146:23 150:3 230:2 240:10 301:21 347:22 349:3

Montreal [1] 27:3 morning [23] 3:6,6,9 14:8 17:4 77:15 105:15 108:21 120:20 143:15 155:20 196:5 206:1 215:2 240:21 241:4 259:10 261:10 271:5,9 315:24 316:4 372:10

mornings [1] 77:8 **Morris** [7] 57:21,22 58:6 164:20 175:18 185:15

219:21 **Morrissey** [1] 218:23 Moss [2] 373:2,13

most [25] 6:25 14:9,22 19:10 24:24 26:7 28:7 28:11 48:4 77:7,11 114:3 143:16 169:11 183:24 184:3,8,19,21 185:3,16 189:9 278:16 285:8 290:2

mother's [1] 144:15 **Mount** [41] 17:17,21 26:23,24 27:9 34:2,10 35:13 36:16 39:13 43:5 45:6 68:1 86:23 95:2.19 141:23 142:5 145:20 146:4 162:13,13 163:15 183:23 189:8,14 196:4 196:21 220:12 222:4 227:24 238:11 247:23 269:10,14,16 270:10,14 271:19 279:2 281:6

move [11] 24:2 122:19 169:7 208:10,23 210:8 232:25 271:25 313:8 315:24 333:14

moved [11] 21:11 26:18 26:23 27:18 52:22 76:17 170:21 184:22 206:25 224:8 245:14

moving [2] 91:25 263:13 **Mrs** [2] 280:25 285:14 **Ms** [1430] 2:2 3:2,3,6,8 3:11,25 4:8,16,22 5:6,12 5:16,20,25 6:5,13,24 7:14,24 8:4,8,14,23 9:3 9:13,20 10:4,25 11:5,15 11:19 12:5,9,14 13:1,10 13:15,19,25 14:5,6,17 14:25 15:11,16,22 16:12 16:18 17:2,10 18:4,14 18:18 19:6,25 20:12,17 20:23,24 21:9,16,21 22:3 22:7,11,18,22 23:4,14 23:23 24:8,13,22 25:11 25:15.21 26:2.16 27:7 27:16,24 28:6 29:4,12 29:19 30:4,10,14 31:9 31:14,24 32:6,9,16 33:7 33:19,24 34:16,20 35:1 35:8,18 36:1,4,6,10,17 37:1,10,24 38:3,11,16 38:21,24 39:9,19 40:4 40:10,15,20 41:2,12,16 41:20 42:7,18 43:13,22 44:2,8,16,25 45:16,20 46:2,10,18,21 47:1,11 48:8,15,23 49:2,6,16,22 50:3,10,14,18,22 51:2,7 51:10 52:2,10,15,20 53:3 53:8,14,25 54:11,16,21 55:6 56:4,8,15,22 57:7 57:17,21,23 58:1,3,4,5,9 58:11,12,25 59:7,17,18 59:25 60:18 61:14,24 62:11,21 63:11,21 64:2 64:7,23 65:5,19 66:4,13 66:19 67:6 68:7,12,19 69:5,12,21 70:8,14,19 71:20 72:4,9,10,21 73:2 73:13 74:1,16 75:14,18 76:2,16 77:6,20,25 78:5 78:15,20 79:5,11,15,20 80:5,12,16,22 81:9,21 81:24 82:9,14,22 83:2,8 83:12,25 84:4,10,18,23 85:6,20 86:6,16 87:2,5 87:10,14 88:18 89:4,10 89:23 90:4,8,16,21 91:6 91:12,20 92:7,19,25 93:5 93:10,22,25 94:6,12,22 95:13.14 96:2.11.16 97:3 97:8,13,25 98:6,19,20 99:1,5,22 100:7,16,20 100:22 101:7,9,10,11,12 101:13 102:5,7,19,23,24 103:3,10,13,16,17,25 104:3,14 105:1,6,11,14 105:23 106:2,3,10,13,18 106:22 107:4,10,14,19 107:24 108:5,10,24 109:4 109:5,10,15,18,19,23 110:6,11,23 111:4,12,16 111:22 112:5,11,19,24 113:1,5,12,17 115:7,15 115:20 116:1,5,12,16,19 116:23 117:4,13 118:8 118:11,16,21 119:4,9,15 119:22 120:8,13,17,18 121:3,8,10,14,18,24 122:12,18 123:2,3,5,10 123:15,21 124:2,12,15

124:21 125:3,9,13,18,22 126:8,14,21 127:15 128:6 128:12 129:5,8,14,21 130:3,7,14 131:1,13,22 132:8,16,24,25 133:13 133:18 134:1,7,12,18,23 135:1,6,7,13,16,21 136:1 136:7,12,19,21 137:1,8 137:9,16,25 138:9,17,24 139:7,8,12,12,14,19,19 139:25 140:7,12,21 141:10,17 142:8,17,20 143:2,10 144:2,12,21 145:1,9,18 146:5,7,18 147:2,8,14,19 148:2,9 148:16 149:3,16 150:1 150:15,16,24 151:7,11 151:16,20 152:8,13,22 153:4,12,19,25 154:9,13 154:20 155:2,7,13,18 156:5,17 157:5,15,22 158:3,13,19 159:4,11,17 160:14 161:2,8,13,15,18 161:22 162:4,10,23 163:4 163:12.20 164:2.7.16.25 165:4,22 166:8,11,23 167:3,9,24 168:11,18,20 169:5,14,19,25 170:4,8 170:16,25 171:7,17,20 171:24 172:3,10,15,18 173:1,5,11,16 174:8,12 174:19 175:6,7,13,16,19 175:24 176:9 177:4,9,15 178:2,7,13,14,23 179:2 179:9,16,24 180:5,9,14 180:22 181:2,6,14,18,22 182:17 183:5,13,19 184:4 184:12,16 185:4,8,12,15 185:18,24 186:5,7,12,17 186:22 187:10,15,20 188:6,12,25 189:11,22 190:3,8,15 191:8,21 192:3,20,25 193:5,10,17 194:4,13,16 195:1,4,5 195:11 196:4,12 197:4 197:12,22 198:6,13,17 199:4,10,14,19 200:3,6 200:10,15,22 201:1,8,14 201:20,25 202:6,15,18 203:2,12,18 204:1,6,13 204:19 205:4,8,22 206:6 206:17,24 207:12,17,22 208:4,9,22 209:6,12,20 210:2,7,25 211:6,12,22 212:2,11 213:9,15,22,25 214:3,6,12,17,22 215:6 215:10,15,22 216:1,14 216:18 217:3,12,16,25 218:12,23 219:3,9,14 221:1,14,19,25 222:9,15 222:18,22 223:3,10,19 223:24 224:5,13,16,23 225:2,14,18,24 226:7,13 226:15,21 227:6,25 228:8 228:9,13,25 229:6,17,22 230:7,14,18 231:4,24 232:6,8,12,16 233:10,15 233:22 234:1,11 235:1,7 235:11,18,20,23,23 236:5 236:9,10,14,20,21 237:1 237:2,11,13,17,18,19,25 238:1,3,12,18,21,24 239:3,8,13,18,23 240:6

240:9,11,14,16,17,19 241:3,11,12,16,20,20,23 242:16,19,23 243:4,9,18 244:1,6,11,15,20,23,25 245:4,8,14,19,21 246:4 246:8,16,20,24 247:6,10 248:3,7,13,20 249:5,11 249:15,18,22 250:4,5,9 250:10,14,15,20 251:1,2 251:5,9,11,18,19,22,23 252:1,8,10,13,19,21 253:3,12,15,17,20,22 254:2,9,14,17,22 255:7 255:13,17,21 256:1,5,12 256:17,22 257:5,10,16 257:16,19,23 258:2,7,11 258:18 259:6,18,24 260:18,19,22 261:4,8,15 261:20 262:2,6,10,16,18 263:9,14,19,24 264:4,4 264:6,7,12,13,17,19,22 264:25 265:3,4,9,14,16 265:20,21 266:2,6,13,18 266:22,23 267:1,2,7,14 267:17.24 268:3.8.13.18 268:22 269:3,4,21 270:5 270:19,21,25 271:3,6,15 271:16,23 272:1,4,5,7,8 272:13,17,23 273:7,11 273:12,14,21 274:1,2,12 274:17,19,20,24 275:4 275:15,21,22,24 276:7 276:11.17 277:1.4.12.19 277:24 278:4,6,10 279:11 279:16,19 280:1,10,13 280:17 281:9,13,20 282:1 282:6,13,19,20,23 283:1 283:5,9,15,17,22 284:2 284:6,11,16,23 285:2,9 285:15,20 286:3,13,15 286:21,24 287:5,12,21 288:4,10,12,21,22 289:2 289:9,16,18,20,21 290:3 290:5.7.10.10.12.13.17 290:23 291:5,12,19 292:5 292:16,20 293:4,8,11,12 293:16,24 294:7,9,13,21 294:25 295:3,6,11,18,25 296:6,13,17,21 297:1,5 297:13,20,25 298:1,5,6 298:10,15,20 299:2,9,10 299:11,15,18,21,24 300:5 300:7,9,13,17,22 301:2 301:7,8,14,19,24 302:3 302:6,14,24 303:2,6,10 303:15,18,23 304:3,12 304:20,24 305:2,5,5,8,9 305:15,19,23 306:4,10 306:13,18,22,24 307:3,9 307:11,12,16,23 308:1,6 308:10,12,15,21 309:1,5 309:11,14,21 310:1,7,11 310:15,19 311:1,7,13,18 311:23 312:1,3,7,13,17 312:18,24 313:3,14,18 313:23 314:3,7,11,16,20 314:25 315:5,14 316:15 316:22 317:2,7,12,17,22 318:2,12,16,24 319:5,14 319:20,25 320:5,9,14,20 320:25 321:8,12,13,24 322:4,10,18,22 323:3,9 323:14,15,21,25 324:5

324:12,20 325:5,11,12 325:14,15,17,20,24 326:5 326:9,10,18,22,25 327:1 327:9,15,19,25 328:12 328:18,22 329:1,2,7,14 329:23 330:1,6,14,16,23 331:2,3,12,17,24 332:6 332:8,12,15,17,18,25 333:7,13,20,25 334:7,12 334:20 335:14,21 336:4 336:9,14,19 337:1,8,17 337:22,23 338:9,15,20 339:6,11,18,24 340:4,6 340:8,18,25 341:5,9,16 342:2,8,15,19,25 343:5 343:10,13,15,17,25 344:9 344:18 345:1,9,15,19,23 346:8,14,18,22 347:2,7 347:13,24 348:6,13,19 349:4,8,14 350:3,11,17 350:23 351:3,17,22 352:2 352:13,22 353:2,13,17 354:4,13,22 355:3,15,22 356:3,6,9,14,23 357:3,8 357:12.20 358:2.7.19 359:4,14,19,23 360:2,5 360:8,22,25 361:6,8,15 361:21 362:6,10,17,25 363:3,6,10,15,20 364:4 364:9,10,18,22 365:14 365:22 366:2,9,14,21 367:4,17,24 368:8,9,14 368:15,25 369:3,6,13,17 369:20,24 370:6,7,13,24 371:4,20,24,25 372:2

multitude [2] 149:11,11 **Mundon** [23] 3:16 58:23 59:15 77:19 80:22,24 81:4,21 136:21 137:8 139:7,12,19 140:8 338:24 343:13,15 368:9,15 369:3 370:7 371:24,25

Mundon's [1] 369:20 **must** [5] 135:5 200:20 227:5 332:23 339:2

Myrtle [2] 260:14 285:14

-N-

nagging [1] 191:24 **naive** [1] 252:6 **name** [16] 98:13 164:14 169:11 172:16 174:17 176:2,6,10,11 177:18,24 249:9 255:20 292:21 312:22,25

names [3] 46:20 169:8 173:24

nature [3] 62:18 132:2 371:24

necessarily [7] 29:13 42:13 70:9 176:5,7 319:1 365:12

necessary [6] 37:19 118:6 153:1 156:3 160:1 202:11

need [24] 12:18 37:12 53:12 60:24 63:7 65:13 66:1 85:25 87:24 88:10 92:5 93:3 101:5 126:18

127:19 128:24 142:13 273:19 274:16 279:14 308:18 320:23 331:5 360:13 **needed** [3] 37:8 92:17 289:8 **needs** [2] 211:16 220:19

negative [14] 10:19 17:15,18 32:22 67:20 114:8 269:13,19,25 270:4 270:13 349:22 351:7,14

neighbour's [1] 175:4 **neither** [1] 362:22

never [7] 53:18 67:18 113:4 164:1 296:12,16 313:21

new [21] 26:24 60:20 142:14 165:19 177:23 181:12 193:19,20 195:21 196:2,22,23 212:15 218:18 220:5,9 221:8 227:23 314:10 316:20 318:1

Newbury [1] 1:15 Newfoundland [9] 269:9,13,16,20 270:8,14 275:6 373:8,11

news [2] 234:23 360:18 newspaper [2] 214:10 214:15

next [25] 45:12 46:14 83:10,13 86:17 133:22 136:17 154:10,10 155:3 164:13 168:12 179:14 181:11 218:5 219:19 220:8 230:1,6,8 242:13 278:9 335:22 341:5,7

night [3] 261:7 266:17 360:10

NL [3] 1:8,14,15 **nobody** [3] 116:22 158:1 201:23

noise [1] 174:24 **none** [1] 33:12 **nor** [2] 171:12 204:24 **normal** [11] 56:20 69:16 70:5,6,10 114:22 158:14 158:20 238:4,7 254:3

normally [4] 37:14 74:18 224:3 292:22

note [462] 3:22 4:7,11 5:2 5:10,17,18 6:3,15,15,17 6:21 7:3,12,15,16,18,21 7:25 8:1,3,12,16,17,20 9:6,10 10:8,10,13 11:4,6 11:23 12:17,24 13:2,4,5 13:8,18,22 14:4,8,9,21 15:6,15 17:7,25 18:10 19:22 20:3 21:8 22:24 24:12 29:11,15,21,23 30:3.7.13.16.17.20.25 31:5,7,11,15,21 32:8 34:19,23,24,24 36:14 37:21 42:22,25 43:15,21 44:5 46:3,15,22,23,25 47:4,5,6,12,13,14,15,16 47:20 48:7 50:2 51:4 83:23 84:5 85:1 86:25

87:18 89:17 93:11 95:6 95:17 97:22 98:9,13 100:10,20 110:14,19 116:16 117:8,11,12,16 119:12.23 120:24.25 121:4 122:3 124:8,10 125:12 126:7,15 128:5 132:21 133:4 138:5.8.12 142:11 143:19 146:11 148:25 149:19 152:20 154:10,11,18,21,25 155:3 155:9,21,23 156:20 157:24,25 158:1,4,6,17 158:23 159:1 160:5,11 164:13,19,20 165:25 166:10,10,12,13,15,20 167:11,12,19 168:1,8,10 168:20,22,25 169:3,15 169:20,21 170:19 171:9 172:9,17 173:10 174:1,3 174:13,14,15 175:11 176:1,12,13,13,14,16,18 176:18,21,21 177:17,21 179:3,15,20,25,25 180:17 180:19.24 181:10.12 182:13,18,20,24 183:7 190:19,21 194:20 195:9 197:6,14 198:9 215:4,14 216:25 217:18 218:2,5 218:21 219:19 221:2 223:1 229:15 230:12 231:5 232:2,3,3,17,24 233:5,9,11,17 234:7,15 235:5,25 236:17 238:7 239:9,16,25 240:2 243:22 244:8 245:11 247:5,12 248:17,21,23 249:3 251:13,20 252:3,15,22 256:6,7,8,13,15,18 257:9 257:12,17,18,20,24 258:6 258:12,22,22 259:4,7,9 259:14,20,22 260:7,17 260:21 261:14,21,23 262:9.23 263:3 266:22 267:12 268:11 269:1,12 270:25 271:2 274:20 275:12,19 278:4,14,14 278:20 279:8,12,14 280:21,22 281:12 282:24 283:10,11,15,23 284:5 284:17 286:1,12,14 287:15 288:2 291:6 292:5 292:6,7,10,18,21,24 293:7,17,22 294:10 295:4 295:10 296:9.20.22.23 296:25 301:13,18,23 302:5,8,11,17,19 308:16 308:19 309:12 311:5 312:2,8,9,12,20,23 313:9 313:9,12 314:2,5,10,19 315:4,7,8,15 316:7,10 316:14 317:10,15,25 318:3,5,6,11,17,23 319:12,23 320:24 321:1 321:1,2,6,14,19,23 322:1 322:12,14,17 323:5 324:18,19,21,22,23 325:4 325:6,7,13,25 326:1 327:2 329:3,12,15 330:3 330:5,8,9 331:6,20 333:6 333:10,15 336:2 337:4 337:21 339:13,17,21 340:5,6 341:3 343:23

344:3,6 347:11,14 348:24 359:15,20 360:13,21,24 364:5 366:7 **noted** [1] 81:1 **notes** [95] 10:6 14:16 15:21,23 16:2 24:3 25:6 25:6 27:23 28:5,9,13,14 28:23,25 31:25 38:8,17 41:4,6,17,21 42:11,15 49:10 50:5,6 52:6,22 55:2 57:22 59:20,23 64:25 65:3 80:8 85:14 115:3 122:20 139:1

152:16 154:3 158:20 168:3,13 169:8,9 173:21 173:24 177:23 178:15.17 178:18 187:23 190:13,17 190:17 191:13 192:16 193:9,11 204:17,20,22 215:2 217:4 227:19 229:19,23 230:2 231:17 238:5 239:5 247:25 257:2 257:2 261:6 292:22 304:9 313:6 319:7,7,9 324:10 324:14 327:6,13 336:23 339:1,2 353:4 364:19 365:5,6 367:2

nothing [5] 104:24 105:2 160:12 187:14 213:13 **notice** [2] 328:6 349:2 notification [2] 192:18 242:9

notified [11] 44:19 91:22 142:23 192:24 193:7.16 194:3 337:5,12,16 362:13

notifying [4] 42:2 43:8 43:17 44:22

notion [3] 83:1 327:12 327:23

November [54] 51:18 54:4,5 83:18,20 84:16 85:17 87:22 93:3,9 98:10 99:6,20 100:10 101:1,17 110:14 115:10.11 117:1 117:3,8 122:25 135:13 138:6 139:2 149:2 152:20 154:15.25 155:4 159:2 335:24 336:2 338:8.24 339:10 340:1,11 341:6 341:10 343:23 344:2,13 346:10 347:11,15 353:18 356:18 360:8.22 364:3 367:13 368:23

now [99] 3:17 4:4 7:8,11 10:1 25:4 28:9 32:12 33:1 34:14 36:14 41:3 43:15 44:5 54:12 58:18 60:1,6 63:2,19 73:24 77:13 79:8 87:2 91:25 96:9 98:8 99:17 104:5 105:18 108:13 109:8 118:8 119:24 120:23 127:4 142:18 148:5 151:15 154:9 156:3 157:22 163:3 169:4,14 171:6 174:22 175:16 177:12 178:16 179:19 181:9,12 182:13 184:11 196:4.17.25 197:9 198:6 198:12 206:9 207:9

218:23 219:2,6 220:14 221:23 228:14 231:4 234:21 240:10 243:2 247:10,12 248:6 249:3 260:18 267:5 275:12 282:18 285:1,25 286:21 288:7,20 304:24 305:8 307:9 312:1 314:7 317:20 333:14 334:11 336:15 341:6 352:4 359:14 363:25

NTV [1] 48:1 number [79] 17:19 22:1 28:22 34:5 38:9 41:21 46:19 55:20 60:2,3,8,13 61:5 64:9.22 73:19.25 74:5,25 75:20 78:23 80:23 113:22 114:10 118:2 128:14 132:22 151:23 152:6 153:8,9,15 159:22 169:10 184:24 189:14,16 190:18 191:6 191:13,25 203:9 224:14 226:12 238:10.22 239:2 239:4,9,21,24 240:15 241:9,15 245:12 246:7 268:6 278:18 285:5,7,8 301:20 345:7 346:6 349:10,19,25 350:1,7 351:1,25 352:3 356:19 358:22,23 364:13 366:16 371:7.8

numbers [63] 16:5,20 17:9,13 18:10,23 19:5,8 19:15,23 20:6,11,15,21 21:3,4,12,14 22:13 23:12 23:18,19,25 24:2,6,11 24:20.25 25:3.5.9 26:4.6 26:11,14,18 33:11 132:23 132:24 133:5 139:21 242:15 244:19 265:14 266:11 278:23 317:21 319:13,18 335:12 349:2 350:9,15 351:20 356:6,8 356:12,13,17 359:3,5,8 363:9

nursing [2] 133:23 135:9

-O-

O'Dea [1] 1:16 **object** [1] 207:10 **obligation** [1] 209:18 **obtain** [1] 97:11 **obviously** [3] 18:9 141:5 occasion [2] 160:4 299:8 occasions [3] 7:4 42:20 194:8

occassion [2] 205:18

207:9 **occur** [3] 77:11 203:25

339:21 occurred [4] 9:10 56:16 150:7 205:25

occurrence [1] 78:11 occurs [5] 90:3 203:7,21

209:24 255:4 October [36] 5:5,18 7:22

7:25 13:5,22 14:3 16:3 18:13 22:23 34:14 36:14 41:15 42:12 44:24 46:3 47:5,13 48:2,2,7 51:4 65:10 66:16 67:2 72:20 77:3 80:21 86:14 87:3 113:9 314:10 336:24 337:7,21 357:22 **odd** [2] 252:18 253:20

oddity [1] 254:12 off [14] 167:21 292:24 293:7,15,23 294:3 295:3 302:17 313:17 339:3.14 339:23 365:8 372:11

offer [1] 140:20 **offered** [3] 145:6,13,17 office [16] 6:17 15:4 21:2 70:22 73:20 94:15 174:2 174:13 178:18 194:9 243:23 259:5 286:2 297:12 316:9 327:3

officer [2] 70:22,24 officials [2] 328:9 370:18 **often** [1] 144:6 **oftentimes** [1] 70:20

omitted [3] 286:10,11 287:11

once [13] 120:2 127:12 182:12 195:21 197:24 218:19 220:5 221:9 290:9 306:7 334:9 335:3 358:1

oncologist [4] 342:11 342:18 343:4,7

one [97] 3:23 4:15 8:13 9:12,15,18 10:13 21:24 22:8 28:23 41:11,15 56:9 57:20 60:9,12 61:13 62:5 63:5 65:12 67:11,16 74:6 77:3 88:6 89:17 90:9 91:16 95:16 99:14 100:8 100:9 101:18,19,23,24 101:24 102:6,8,11,14 103:25 106:8.9 107:18 107:22 108:15 109:13 116:6 118:12,12 127:14 134:5 142:15 155:11 164:10 175:16 176:17 179:3 180:8 190:19.20 197:15 204:21 205:18 210:22 211:1,2 212:4 219:21 220:8 224:2,2,7 224:7 239:4 241:3 267:19 276:12 278:9 279:24 282:4 283:20 284:9,9,14 294:14 304:10 309:16 310:3 318:4 353:5,7 358:23 359:20,24 365:21

one-page [2] 336:2,5 ones [3] 20:7 163:18 164:1

ongoing [4] 78:25 92:24 93:18 141:22

Ontario [1] 144:7 onto [4] 176:15 275:18 276:3,4

open [5] 75:2,23 76:6,6 102:13

opened [1] 91:3

operations [2] 252:8 276:19 **opinion** [1] 275:11

operation [1] 203:6

operational [3] 27:10

opening [2] 83:15,18

opens [4] 83:19 86:2

operating [2] 12:1 37:16

operate [1] 28:21

88:12 90:15

39:1 205:15

opportunity [2] 79:13 79:24

opposed [3] 53:1 271:20 368:23

optimization [1] 114:4 order [2] 84:25 97:21 organization [3] 60:23 129:16 130:9

organizations [2] 131:5 368:19

original [7] 11:8 12:17 30:20 72:13 141:15 269:24 270:17

originally [3] 286:22 287:2,9

originates [1] 67:2 **Osborne** [12] 55:12,12 59:10 193:22 324:9,13 325:3 341:22 366:6,15 366:23 367:6

otherwise [5] 193:13 284:20 345:18 346:4 347:5

Ottawa [1] 87:20 Ottenheimer [3] 55:9 73:1 132:5

outcome [2] 46:9 136:5 **outcomes** [1] 64:18 **outline** [2] 70:1 71:8 **outlined** [1] 226:13 outlines [1] 33:14 outside [4] 40:2 346:21 347:1,3

outstanding [2] 224:15 226:13

overall[1] 26:15 **overhear** [1] 352:11 **overlooked** [1] 247:8 oversight [3] 246:5,25 321:17

overtime [1] 141:24 own [15] 21:25 29:16 37:16 39:8 63:25 67:21 75:17 85:4 98:4,8,16 103:17 104:8 203:7 212:12

-P-

P_[5] 64:20 84:8 133:25 134:21 260:17 **P-0046** [1] 113:8

P-0096 [1] 83:8

79:25 169:10 176:20

189:15,16 191:11 192:1

192:8 224:3 246:2 290:2

P-0097 [1] 92:3 **P-0098** [3] 99:4 101:24 108:13 **P-012** [1] 174:22 **P-0125** [9] 161:17 171:16 180:12 195:11 240:2 243:21 328:5 337:20 340:3 **P-0141** [1] 5:9 **P-0163** [1] 3:11 **P-0171** [2] 259:2 280:13 P-0172 [1] 285:1 P-0179 [1] 360:1 **P-0192** [3] 281:24 328:4 328:15 P-0804 [1] 66:25 **P-0817** [2] 236:24 243:2 **P-100** [1] 139:5 **P-1417** [1] 235:17 **P-1438** [1] 77:1 P-1439 [1] 80:19 P-1441 [1] 101:7 **P-1447** [2] 238:17 241:19 **P-1450** [1] 338:18 **P-1477** [2] 64:22 336:22 **p.m** [7] 92:11 100:25 101:18 280:16 281:23 282:10 372:14 **pace** [2] 57:1 144:19 **packaging** [1] 39:12 page [51] 3:14 5:15,16 5:23 11:23 17:7 32:6 43:1 46:14.14 64:21.22 67:14 113:11 116:15 157:21,23 161:17 171:16 175:11 179:13 180:12 181:9 195:11 218:6 231:4 233:19.21 238:17 240:2 241:19,20 243:21 278:3 278:19 282:4,4 286:1 291:25 292:1,12 293:21 297:9 307:10 328:5,15 336:22 337:20 340:3 347:12 360:20 **paid** [3] 114:14,18 143:14 panel [17] 27:4 184:1 220:16 269:9,13,17,20 270:3,9,12,14,15 275:6 275:9,11 334:24,25 **paper** [5] 19:7 344:4 348:1,24 349:16 **paragraph** [13] 10:22 11:7 182:1 281:8 295:22 295:23 328:21,25 329:2 329:6,21 330:19 331:21 paragraphs [2] 295:24 296:5 Pardon [4] 151:8 205:3 273:8 309:22 part [29] 6:25 28:7,12 39:15 54:24 56:3 77:7 77:11 83:19 145:10 169:11 183:24 184:3,8 184:21 185:3.16 189:10

190:10 206:3 208:18

211:25 230:21 246:5,25 321:17 345:12 352:11 357:17 **partaking** [1] 346:13 partially [1] 191:5 participate [1] 279:6 participates [1] 56:10 particular [40] 9:18 21:8 24:5 28:24 29:13 30:5 41:11 62:21 69:6 71:21 72:11 73:17 77:17 78:7 79:21 84:5 102:22 103:11 110:13 143:11 168:1 179:3 203:10 206:12 213:7 230:24 249:24 251:12 252:3,23 253:13 262:19 265:5 266:16 324:21 328:2 341:21 352:3 358:8 361:22 particularly [3] 55:1 178:10 228:19 party [4] 216:20 217:13 355:18,23 **pass** [1] 237:25 passed [1] 189:2 passing [2] 146:20 343:12 past [4] 32:21 106:19 227:18 355:10 **pasting** [2] 141:8,12 pathologist [6] 45:4 86:22 95:2,10,18 114:19 pathologists [3] 114:14 114:24 116:11 **pathology** [1] 260:5 **patient** [9] 10:17,22 39:25 67:12 109:13 238:10 242:13 269:19 338:13 patient's [2] 141:25 270:17 patients [80] 16:8 33:13 40:2,6,8,23 42:2 43:7,9 43:11,18 44:6,18,22 68:22 85:24,25 86:1,5,9 86:15 88:7,8,11,20,25 89:1 91:22 92:24 93:17 93:24 94:21 102:1 133:8 133:9,12,23 134:24,24 165:19 192:18,24 193:7 193:16 194:2 195:21 196:3,22,23 218:18 220:5 221:9 227:23 235:14 238:22 240:5 242:1,2,16 243:7 244:14 260:9 265:24 269:18,24 271:13 271:13 288:18 289:13 335:2.8 337:5.12.15 338:4 342:12 349:11 350:4,21 356:19 **patients'** [3] 35:11 220:19 269:12 **peer** [2] 45:4 130:17 **Pennell** [1] 139:19 **Pennell's** [2] 140:7,8 **people** [25] 46:19 60:2,3 61:5 62:6 64:5 74:23

350:1 351:15 352:1 358:24 359:1 371:7.8 **people's** [2] 169:8 173:23 **per** [2] 47:12 61:15 percent [28] 16:7,16,22 133:7.11.11 141:1.21 143:6 162:8 188:15,15 188:16 192:9 225:6 226:10 260:4 262:5 263:7 263:17,20 265:8,13 271:14 353:5,6,7 359:18 **percentage** [1] 16:22 **perfect** [2] 25:4 28:21 perhaps [17] 14:18 29:6 44:14 58:22 63:17 83:9 104:12 105:17 112:6 116:11 123:6 155:19 172:12 191:19 225:10 358:22 365:1 **period** [17] 14:20 32:23 58:6 61:23 66:22 77:17 106:16,21 107:1 111:25 144:14 152:14 153:13,20 166:14 168:19 331:6 periods [1] 112:21 person [19] 57:10 58:10 58:12 62:5 63:19 74:21 172:16 176:2,4,6,10,23 177:1,7 190:16 206:12 256:25 342:23 358:17 personal [4] 86:11 211:7 212:5 366:23 personally [4] 197:13 207:3 259:13 316:13 **personnel** [2] 367:15 369:21 perspective [13] 29:8 31:6 34:6 35:12 69:22 86:8.9 141:25 156:25 157:10 211:9 212:12 372:4 Pg [1] 2:3 **pharmacists** [1] 341:19 **phone** [2] 92:16,17 **phonetic** [1] 336:20 **phrase** [1] 184:3 **physician** [2] 63:7,10 **physicians** [8] 33:16 43:3,6,8 44:12 184:1 220:17 270:1 pick [2] 73:8 92:16 picture [4] 192:17 370:25 371:10 372:5 piece [4] 19:7 100:10 311:10 348:23 **Pierre** [5] 102:2 133:23 134:17,25 135:10 Pike [1] 1:14 **Pilgrim** [1] 235:23 **pin** [14] 106:12,14,17,19 106:23 107:2,3,6,9,11 107:13,25 108:3,8

pitfalls [1] 114:25 place [20] 5:4 26:21 45:24 54:2 56:14 61:12 61:15 96:6 227:14 280:4 299:23 300:21 334:17 340:16,23 347:6 348:11 366:3 367:13 368:22 **places** [2] 10:15 341:20 **plan** [1] 33:14 **planning** [3] 363:13,18 363:21 **plans**[1] 245:24 **play** [4] 62:24 64:10 351:2 353:24 **players** [1] 191:14 **pleased** [3] 324:6 340:16 340:22 **PO**[1] 275:20 point [121] 4:3 8:15,21 14:25 21:24 23:10 30:24 32:25 35:7 41:23 43:10 43:14 44:17 45:19.21.23 46:11 51:7 53:11 57:20 65:25 73:14,17 78:19 81:22 88:19 90:10 102:2 104:23 116:6 129:3 142:17 143:11,22 145:14 145:19 146:11,22 148:17 150:3 153:7 156:10 157:14 158:22 160:10.15 162:1,11,18 163:5 164:21 171:2,17 175:24 176:17 181:13 183:14 185:25 186:23 188:16 193:18 196:16 197:19 198:2,20 199:21 200:18 202:7,20 208:13,24 213:14 218:23 219:10 221:12 222:1 229:11 239:22 249:24 250:3,5 251:2,7 254:8 257:22 258:16 259:22 262:19 263:4,10 265:2,5 265:22 271:4 273:24 275:23 277:8.10.16 279:16 298:19,21 328:2 332:19,21 333:9 337:11 337:18 338:13 339:16 341:18 342:9 349:10 350:16 353:5.21 358:8 359:22 363:3.24 366:8 **pointed** [3] 32:12 48:6 332:6 **pointing** [6] 115:5 124:15 215:2 291:23 330:19 332:16 **points** [11] 27:12 47:18 49:15 51:15.16 58:17 132:21 304:15 356:21 362:20 364:25 **polices** [1] 159:25 **policies** [2] 118:5 128:24 policy [4] 59:11 153:1 177:23 343:2 polite[1] 90:13 **political** [1] 204:11 **pop** [1] 304:10 portfolio [2] 74:24 319:10

portion [5] 9:1 251:20 286:12 289:19 333:6 **posed** [6] 137:23 146:6 147:6 198:8 362:24 363:25 **position** [15] 23:7,8 89:12 90:17,20 91:3,5 124:20 198:3 207:15 246:1 247:4 292:9,18 370:7 **positive** [10] 10:20 17:18 114:6,11 133:8 271:20 271:21 349:22 351:6.14 **positivity** [3] 271:13,14 359:16 **possession** [1] 65:9 possibilities [1] 128:3 **possible** [4] 74:15 75:10 141:25 279:10 **potential** [2] 16:8 48:13 potentially [2] 4:10 85:9 Power [1] 260:10 PR [2] 32:22 133:9 **practice** [9] 63:15,19,23 64:1 71:11 153:1 158:14 238:4.7 **practices** [5] 45:8 118:6 120:1 128:25 160:1 precipitated [1] 234:23 **precision** [1] 358:18 **Predham** [88] 99:5,25 100:20 101:9,10,11,13 102:5,24,24 103:25 106:2 109:18 132:24 134:6,23 135:6 231:12,18 232:1 232:17,19 233:1,8,11 235:19 236:9,20 237:17 237:20 238:2,21 240:9 240:14,17,19 241:13,20 242:16 244:23 245:14.19 249:1 250:23 251:4,10 251:18 252:3,11,19 253:20 263:12 264:5,8 264:13 265:15,20 270:19 270:25 273:11,20 274:1 274:10,18 275:7,22 279:18 285:5 289:20 290:5,7,11,12 292:15 315:22 325:11,11,13,15 325:18,20 326:5,10,22 327:1 334:2 356:6 370:14 Predham's [4] 241:21 245:11 272:4 334:12 **prefer** [2] 71:12 191:20 preferable [1] 62:5 **premier** [17] 46:17 231:7 280:21 318:5,15 319:7 320:18 321:16 322:24 323:2,4,17,18,22 324:4 324:6 328:8 **premier's** [7] 243:23 259:5 286:2 297:12 318:7 318:19 327:2 **premise** [1] 25:8 preparation [6] 41:6 42:15 83:14 84:3 251:12 364:15

prepare - Q.C **Inquiry on Hormone Receptor Testing**

May 27, 2008 prepare [15] 10:6 13:5 14:21 28:8 30:13 83:23 97:22 116:17 187:22 204:17 236:16 243:3 248:23 291:7 330:8 prepared [59] 4:11 5:5 6:4,9,11,14 8:12 9:7,7 9:12,15 13:18 25:6,7 28:12 38:18 41:22 42:23 46:16 47:8,12,14 50:1 84:25 85:14 98:10 105:7 116:17 127:1 157:24 164:20 175:17 176:3,7 176:10,23,25 177:1 189:20 197:15 231:12,17 231:18,20 232:2 233:2 238:7 240:20 248:22 260:6 291:4 292:24 293:15 318:17 324:24 334:10 337:22 360:22 364:5 **preparing** [18] 3:22 9:17 12:25 20:3 27:22 30:7 37:21 38:8 39:3 93:11 117:11 217:18 245:9 251:20 341:3 344:2 365:4 366:7 **present** [7] 65:15 66:7 78:3 80:23 177:14,16 365:17 **presentation** [5] 240:25 253:4 259:11 315:21 316:7 **presented** [3] 21:14 22:14 359:8 **press** [1] 67:21 pressure [1] 28:14 **presumably** [2] 204:4 204:12 **presume** [2] 204:10 211:25 **pretty** [3] 28:15 57:11 304:13 **prevent** [6] 247:15 255:6 255:10 277:18 311:11 330:21 **preventive** [2] 11:11 12:19 previous [4] 94:13 239:4 274:21 364:3 previously [1] 351:21 **primarily** [1] 59:14 **primary** [2] 52:21 220:19 **priority** [7] 64:12 72:24 117:24 119:2 146:12 198:10 200:9

Pritchard [4] 233:23

286:22 291:22 292:2

Pritchard/Mark [1]

problem [44] 91:11

100:11 114:12 117:19,21

118:3,4,5,15,24 119:21

119:25 120:2 121:1,22

122:4 126:12 127:12

128:18,20,22 142:24

privy [1] 54:19

1:8

149:1,5,5,10,18 152:25 155:25 156:22 157:3 159:10,16,23,24,25 165:10 172:21 174:24 182:5 195:14 220:11 291:9 362:1 **problems** [11] 92:25 93:19,20 94:4,20 97:6 149:11 175:6 197:11 202:17 218:24 procedures [3] 12:2 45:9 247:17 proceed [4] 196:2,20 199:25 227:22 **proceedings** [3] 220:23 222:8 224:9 **proceeds** [1] 279:7 process [54] 29:5,6 32:24 35:5 36:20 40:13,17 42:19 43:17,19 44:21 53:19 55:14 56:20 61:7 61:11,15 70:10 92:24 93:18 94:4 118:3 128:15 128:16 149:6 151:25 152:17 153:16 158:20 159:23 166:3,16 167:5 167:20 168:6,23 169:7 170:23 171:5,10 183:15 184:23 186:16,25 188:14 196:1,19 209:24 210:19 212:18 220:18 254:3 255:12 334:23 **processes** [7] 60:20 212:15,17,23 213:3 227:13 247:22 **processing** [1] 39:12 **profession** [1] 130:21 **profile** [1] 74:15 program [1] 339:13 programs [4] 76:24 208:6 211:15 340:15 progress [13] 35:6 36:20 152:3 166:5 171:13 182:10 188:22 195:19 218:17 220:3 221:7 226:5 281:4 **project** [2] 241:2 253:9 pronouncements [1] 82:20 **properly** [2] 205:21 210:24 **protected** [3] 130:10 327:7,13 **protection** [1] 132:14 **protocol** [5] 82:4 114:17 177:14,16 339:1 **protocols** [3] 65:13 66:1 66:11 **provide** [17] 29:15 37:17 71:3 79:23 92:22 95:17 97:20 130:25 136:22

38:5,19 39:2 48:6 49:5 103:18 110:16 120:20 122:2 138:25 151:22 154:6,21 191:1 197:17 217:19 223:20 232:17.20 233:3 236:9,19 237:21 241:21 242:15 243:24 245:13.15 259:23 261:22 263:12,25 264:2,14 288:15 289:11 290:22 291:1,3 292:14 303:17 319:18 326:10 328:7 329:11.15 343:21 348:18 348:21 349:3,16 350:16 357:14,23 363:4 provides [2] 29:10 260:8 **providing** [11] 16:10 20:6,16 23:12 52:5,21 76:7 103:5 299:6 326:7 335:12 **province** [10] 32:20 40:9 74:23 133:7 143:12 144:1 144:9 155:8 158:5 341:21 **provision** [1] 326:15 **public** [24] 3:18 8:22 10:2,2,5,7 55:22 74:19 74:22 75:8,9 76:23,23 79:9 82:19 150:3 218:3 242:12 243:12 338:2 344:16,20 362:14 363:13 **pull** [1] 304:8 **pulled** [1] 30:1 **pure** [2] 349:17 350:18 purpose [10] 7:11 79:22 84:21 229:24 318:3,23 320:18 367:22,25 368:17 purposes [1] 328:7 pursue[1] 98:24 put [37] 26:21 34:24 61:11 63:5 87:18 90:25 95:16 98:12 120:24 124:7 133:3 140:2 154:2 155:22

329:2 340:16,23 344:4 puts [1] 242:1 **putting** [4] 64:16 96:6 262:23 315:17

227:13 237:20 245:9

279:24 282:10,11,23

308:17,25 326:15,21

283:15 284:21 307:23

276:5,15,24 279:12,23

-Q-

Q.C [1018] 1:6,7 2:3 3:3 3:5,10 4:2,13,18,25 5:8 5:14,22 6:2,7,19 7:10,20 8:2,6,10,19 9:24 10:11 11:2,12,17,21 12:7,11 12:20 13:6,12,17,21 14:2 14:11,24 15:13,18,25 16:14,23 17:5,12 18:6 18:16 19:2,14 20:9,14 20:19 21:5,13,18,23 22:5 22:9,15,20,25 24:4,10 24:15 25:10,17,23 26:9 27:5,14,20 28:1 29:1 32:5.11.18 33:9.21 34:13 34:18,22 35:3,14,23 36:3 36:8,12,19 37:5,20 38:1 188:1,8,19 189:5,19 38:7,13,20 39:5,14,24 190:1,5,11 191:2,17,23 40:7,12,18,24 41:10,14 41:18 42:5,9,24 43:20 43:24 44:4,10,23 45:2 45:18,22 46:5,12,24 47:3 48:3,10,21,25 49:12,18 49:24 50:7.12.16.20.24 51:6,21 52:8,12,17,23 53:6,10,21 54:9,14,18 54:23 56:2,6,11,18 57:3 57:15,19,25 58:8,13 59:3 59:13,21 60:16 61:1,19 62:1 63:9,13,24 64:4,19 65:7,22 66:6,15,24 67:10 68:9,16,21 69:9,18 70:4 70:12,17 71:17,24 72:7 72:15,23 73:4,21 74:4 75:4,16,24 76:9,25 77:16 77:22 78:2,12,18,22 79:10,17 80:2,7,14,18 81:19 82:1 83:7,16,21 84:2,7,14,20 85:2,16,22 86:12,19 87:7,12,16 92:2 92:9.21 93:7.14 94:2.8 94:17,24 95:20 96:8,13 96:24 97:5,10,23 98:3 98:15,23 99:3 100:2,13 100:18,24 101:15 102:10 102:21 103:6,12,21 104:7 104:19 105:3,9,16,24 106:5,15,20,25 107:8,12 107:17,21 108:2,7,12 109:1,7,12,17,21,25 110:8,17 111:9,14,18 112:1,8,15,23 113:3,7 113:14,19 115:9,18,22 116:4,14,21,25 117:6,15 118:14,18,25 119:6,11 119:17 120:3,11,15,21 121:7,12,16,20 122:6,14 122:24 129:9,19,24 130:5 130:11,18 131:8,16 132:4 132:12,19 133:2,15,21 134:3,9,14,20 135:3,12 135:18,24 136:3,9,16,24 137:7,12,21 138:4,13,20 139:4,10,16 140:4,14 141:3,13,19 142:10,22 143:4,24 144:10,17,23 145:5,12,24 146:9,24 147:4,10,16,21 148:4,12 148:23 149:9,20 150:8 150:20 151:5,9,14,18 152:4,11,19,24 153:6,18 154:8,16,23 155:5,10,15 157:20 158:8,16,25 159:6 159:13,19 160:22 161:4 161:11,16 162:3,20,25 163:8,17,24 164:5,12,18 165:2,7 166:7,18 167:1 167:7,16 168:7,15 169:1 169:13,23 170:2,6,10,20 171:3,15,22 172:1,6,14 172:20 173:3,8,13 174:6 174:10,16,21 175:1,5,9 175:15,21 177:22 178:4 178:12.19.25 179:7.11 179:18 180:1,7,11,16,25 181:4,8,16,20,25 182:22 183:8,17,21 184:6,14 185:1,6,10,14,20 186:4 186:9,14,19 187:5,12,17

192:12,22 193:2,8,12,23 194:11,18 195:2,7 196:14 197:7,20 198:5,15,24 199:7,12,16 200:2,8,12 200:17,24 201:5,11,17 201:22 202:4 204:3 214:1 214:9,14,19,25 215:8,12 215:17,24 216:5,16,21 217:9,14,21 218:4,14 219:5,12,18 221:16,22 222:5,14,20,25 223:6,16 223:22 224:1,12,19,25 225:9,16,20 226:1,11,18 227:2,16 228:2,11,16 229:2,13,20 230:4,11,16 231:2 232:5,10,14 233:7 233:12,18 234:3,13 235:6 235:16,22 236:7,12,18 236:23 237:4,15,23 238:8 238:14,20 239:1,6,11,15 239:20 240:1,8,13 241:7 241:14,18,25 242:21,25 243:6.11.20 244:3.9.13 244:17,22 245:2,6,17,23 246:6,10,18,22 247:1,9 248:5,9,15 249:2,7,13 249:17 250:1,8,13,17,25 251:8,14 254:13,19 255:3 255:9,19,23 256:3,10,14 256:20,24 257:7 259:1 259:15 260:1,24 261:12 261:17,24 262:4,8,12 263:5,16,22 264:3,10,16 264:21 265:6,11,19,25 266:4,8,19,25 267:4,9 267:21 268:1,5,10,15,20 268:24 269:7,23 271:1 271:11,18 272:3,10,15 272:20 273:3,9,17,23 274:5,14,22 275:2,17 276:1,9,14,23 277:6,14 277:21 278:1.8.12 279:21 280:3,11,19 281:11,15 281:22 282:3,8,15,22 283:3,7,13,19,25 284:4 284:8,13,19,25 285:11 285:17,22 286:5,20 287:1 287:7,18,24 288:6,19,24 289:5,15,23 291:16,21 293:1,6,10,14,19 294:1 294:11,19,23 295:2,8,13 295:20 296:2,11,15,19 296:24 297:3,7,15,22 298:3,8,13,17,24 299:7 299:14,20 300:2,11,15 300:20,25 301:4,10,16 301:22 302:1,12 304:23 305:4,11,17,21 306:1 307:8,14,18 308:4,8,14 308:23 309:3,10,17,23 310:4,9,13,17,22 311:3 311:9,15,20,25 312:5,11 312:15,21 313:1,11,16 313:20,25 314:6,13,18 314:23 315:2,10 316:11 316:19,24 317:4,9,14,19 317:24 318:9,14,21 319:3 319:11,16,22 320:3,7,11 320:17,22 321:5,11,21 322:2,7,15,20,25 323:11 323:19,23 324:3,7,16

145:21 149:14 206:4

227:21 246:11 304:22

provided [67] 7:16,17

18:11 21:4 23:19.25 25:2

25:9,25 28:4 29:20 30:15

325:16 360:12

325:1,9,19 326:4,14,20 327:4,11,17,22 328:3,14 328:20,24 329:4,10,19 329:25 330:12,18,25 331:9.14.19 332:4.10.14 332:22 333:4,12,23 334:3 334:15 335:9,17 336:1,6 336:12.16.21 337:3.13 337:19,25 338:11,17,22 339:8,15,20 340:2,10,20 341:4,13,24 342:5,13,17 342:22 343:3,8,14,19 344:7,11,22 345:5,11,17 345:21 346:3,11,16,20 346:25 347:4,9,19 348:4 348:9,15,25 349:7,24 350:8,13,20,25 351:12 351:19,24 352:6,15,20 353:8,20 354:9 356:5,11 356:16,25 357:6,10 358:10,14 359:13,21,25 360:7 361:2,11,17,24 362:8,19 363:2,8,12,17 363:23 364:7,17 365:10 365:19.24 366:4.11.18 366:25 367:11,21 368:4 368:12,20 369:2,10,15 369:19 370:4,9,19 371:2 371:12.23 372:6

quality [16] 101:3 108:18 114:15 115:1 117:21 129:15,22 130:1,16,24 131:2,19 165:9 182:4 195:13 219:24

quarter [1] 271:5 **questioning** [10] 19:23 98:25 142:3 146:2,16 147:12 153:23 161:1 196:5,6

questions [47] 30:18 31:1 88:5,6 100:4 109:9 117:18 119:13 129:11 136:22 137:6,20,22 138:2 138:7 150:6 154:5,7 159:8,14,16 164:22,24 174:5 198:7 218:7 220:9 220:10 236:3 260:16 268:7,12 270:6 271:10 272:2 273:1 274:7 305:24 362:10,22,23,24 363:25 366:12,17,20 371:11

questions/key [1] 142:14

quick [2] 73:7 86:24 **quickly** [4] 28:16 141:24 162:14 271:7

Quinn [1] 74:7 **quite** [12] 9:6 10:14,23 57:1 75:22 105:7 134:15 212:19 262:20 303:14 358:17 364:13

quoting [1] 18:23

-R-

radar [1] 76:15 Radio [1] 74:7 raise [1] 79:25 raised [7] 16:25 66:17 66:22 70:2 81:21 85:9 355:19 **raising** [4] 34:7 68:25

71:13 250:5

ranged [1] 271:14 rate [10] 345:8 349:21,25 352:8 353:12,25 355:2 355:13,19 359:16

rates [2] 346:6 355:10 rather [3] 128:9 140:2 354:25

re [1] 99:8

reach [3] 101:3 102:3 108:18

reaching [1] 93:24 **reacted** [1] 348:7

reaction [2] 65:15 66:3 **reacts** [2] 65:14 66:2

read [10] 16:6,20 19:18 101:20 126:6 128:19,20 258:5,12 272:25

reader [1] 255:10

reading [6] 18:21 88:15 89:16,16 126:15 267:13

ready [5] 279:15 308:19 333:10 360:14 372:9

real [2] 184:18 193:6 realization [1] 200:19 realize [2] 73:9 321:22

reallocate [1] 212:25

really [9] 30:23 64:15 67:15 91:10 212:1,7 235:2 327:20 355:7

reason [6] 72:12 88:13 114:2 180:2 274:15 289:6

reasonably [1] 211:8 reasons [8] 113:23 247:14 255:4,11 277:17 311:10 330:20 355:20

recalls [3] 299:22 306:2 306:5

receipt [1] 134:11 receive [15] 36:21 38:15 42:14 106:11 130:6 132:6 132:11 233:13 239:2 325:23 335:19 336:8,17 343:22 344:1

received [71] 5:11 15:8 15:9 50:25 65:10 86:21 94:10 95:1,9 100:14 102:4,23 105:4 106:2,7 106:17.19 107:16.25 108:3 118:20 121:17 122:1 132:24 134:5,10 135:6,10 148:18 195:22 218:20 219:16 220:6 221:10 222:17,24 226:3 228:24 233:8 237:6 240:4 240:18 241:10 242:6,22 246:2 247:19 248:11,12 248:18 249:21 250:7 254:15 259:7 261:2 262:15 264:24 266:1 267:18 268:11,17,19 270:19 273:11 277:23 286:18 325:10 332:9

335:23 336:24 347:22

receiving [7] 24:18 44:7 186:1 191:4 192:1 296:25 370:11

recent [6] 14:9,22 19:10 143:16 174:11 301:15

receptive [1] 262:17 receptor [7] 1:2 278:17 281:3 285:24 286:9 297:17 373:4

receptors [5] 10:20 165:12 182:7 196:3 227:24

RECESS [2] 105:21 280:8

rechecking [1] 335:7 recipient [2] 254:21,23 recognizing [1] 232:21 recollect [5] 103:23,24 288:7,11 298:25

recollection [16] 51:16 65:23 66:8 79:2 110:19 110:24 111:19 167:18,25 168:2 298:18 299:16 302:4 304:24 305:7 332:5

recollections [1] 104:9 recommendation [2] 202:10 242:10

recommendations 1801 96:5 97:20 122:21 129:18 131:25 148:20 149:7 150:18,22 151:2,4,24 152:1,6,17 153:10,16 156:7,11,19 157:1,9 165:15,21 166:1,6,16,20 167:5.13.19.22 168:23 170:22 171:11 172:24 182:8,15,25 183:10,16 186:11,24 187:4,8 188:5 188:10,14,23 189:4 195:17 197:25 199:23 218:10,25 220:1 221:5 224:15,21 225:5,12 226:4 226:13 227:5,13 228:4 228:20 229:9 247:11,20 248:1,19 254:16 255:1 257:3 261:1.3 278:2 332:11 340:13

recommending [1] 11:10

record [1] 28:19 **recorded** [1] 16:5 **records** [1] 314:8

recurrence [7] 118:7 153:2 160:2 247:15 255:6 277:18 311:12

reduced [1] 77:10 **reduces** [1] 64:13

refer [3] 84:6 133:22 268:25

reference [23] 4:10 12:18 100:19 110:13,18 118:8 128:15 152:16 165:9 171:9 220:24 221:4 260:3 262:1 263:6 265:7 275:11 277:15,22 280:24 281:1 354:14 361:23

referenced [3] 15:23

265:23 306:11

referencing [1] 73:24 **referred** [5] 13:23 71:22 181:10 227:19 291:18

referring [7] 43:25 67:12 118:9 207:20 236:13 251:17 265:13

refers [3] 65:24 285:13 338:1

reflect [3] 86:24 317:11 317:25

reflected [1] 193:9 reflection [2] 287:8 330:2

refused [1] 333:5 refusing [1] 333:8 regard [1] 63:14

regarding [27] 17:1 43:9 48:13 49:15 67:3 79:3 81:5 87:19 99:11 100:5 102:1 108:18 139:17 143:8 146:25 206:12 214:4,10 242:9 247:10 260:20 262:14 269:11 300:8 329:6 334:19 345:6

region [2] 48:14 81:1 regional [11] 1:10,17 28:12 29:10,14 70:15 71:5 208:12 213:4 238:5 276:19

Registrar [1] 102:14 **registry** [1] 231:11 **regrettably** [1] 190:9 **regular** [4] 63:17 78:11 80:9,13

regularly [4] 66:21 74:25 75:21 335:1

regurgitating [1] 25:19 **Reid** [8] 46:18 67:3,7 68:15 69:8 71:22 72:1 72:14

related [8] 4:11 60:13 71:1,4 96:20 130:16 364:21 368:19

relates [1] 123:20 relation [3] 169:15 234:6 292:4

relationship [1] 209:16 relayed [2] 68:5 343:9 released [1] 338:2 relevant [1] 355:1

reliability [1] 24:17 reliable [1] 111:7

relied [7] 11:3,6 14:8,21 28:7 39:2 151:21 **rely** [6] 18:19,25 19:8,12

rely [6] 18:19,25 19:8,12 208:5 364:14 relying [4] 19:4 38:4

42:16 145:20 **remaining** [2] 242:6 245:24

remarks [1] 126:19 **remember** [35] 16:19 34:7 35:10 66:23 98:2 98:22 123:3 124:9 126:3 126:4 137:2 138:10 143:19 161:9 170:18 262:21 265:4 273:2 298:4 298:7 302:8,9,15,18 303:3,17 304:4,25 306:19 306:20 331:5 347:15 356:1 367:18,19

remembered [4] 298:11 302:23 303:7 304:2

remembering [1] 126:2 remove [10] 166:25 286:19 288:25 289:3 290:20 292:12 293:20 294:5 312:22,25

removed [7] 165:5 166:24 288:8 297:4,18 309:6.6

reoccurrence [1] 330:22 **repeating** [1] 25:20 **replace** [6] 260:7 279:12 279:24 307:15,19 308:16

reply [2] 101:8 123:18 report [29] 11:25 12:4 26:5 45:11 86:21 95:1,9 113:9,10,11 115:14 123:9 125:25 127:12 132:2 172:4 195:22 218:19 219:15 220:6 221:9,13 221:17,21 226:9,14 227:21 228:7,23

reported [9] 10:18 17:18 17:21 18:7 19:17 25:3 361:9 362:4 368:16

reporting [11] 25:5 34:11 48:18 114:18 211:7 212:5,8 265:17 266:14 336:10 357:13

reports [58] 32:22 87:8 87:17 112:25 115:24 116:7,8 121:17 122:1 123:20 124:17,23,24 125:8,17 127:17,22,23 129:4,12 132:2,7,11,15 138:16,22 148:18,20,24 149:8 151:25 156:19 182:12 196:11 197:11 202:10 222:17,19,24 223:8,12 225:23 226:3 247:18 248:11,18 249:20 250:6 254:15,24 260:6 261:2 262:14 264:23 277:22 330:15 332:7,9

representative [2] 11:18 114:22

represents [2] 16:7

request [11] 9:9 45:13 45:17,25 81:17 217:2,5 232:18 279:15 308:20 314:9

requested [10] 7:18 8:13 8:17 10:10 130:23 131:19 230:12 245:25 246:13 364:2

requesting [1] 368:11 require [2] 99:10 328:8 required [3] 114:23 May 27, 2008 326:1 328:6 requirements [1] 60:22 **rereading** [1] 119:23 research [1] 26:25 reservations [2] 193:3 194:1 resolved [1] 369:9 resources [1] 212:25 respect [60] 11:9 21:7 26:18 41:4 59:19 61:16 62:24 63:2 64:3 67:8,9 67:25 69:16 74:2 76:10 78:14 81:10 82:10 84:5 86:10 122:13,15 129:22 131:2 140:25 160:17,19 160:20 169:12 193:18 194:5 198:14,22 199:17 202:20 211:14,14 212:22 229:8 241:1 246:3 265:23 266:21 287:14 302:10.16 316:1 335:23 341:19 342:12 349:20 351:4.6 352:14 353:4 354:6 358:3 365:15 366:22 370:25 respond [1] 141:5 responding [1] 270:7 response [12] 3:19 20:5 87:20 88:1 118:13 126:25 140:19 142:15 220:25 227:18 284:7 332:15 responses [5] 73:8 118:2 159:21 195:24 340:12 responsibilities [1] 62:22 responsibility [7] 36:9 204:5 responsible [5] 39:7 40:2 52:4 71:6 204:10 result [2] 156:11 297:24 resulted [1] 96:22 results [99] 27:3,8 34:5

52:7 53:18,20 62:7 70:16 34:12 43:6 45:14 67:23 96:23 114:11 115:2 118:4 118:7 123:9 141:2.21 142:4,12 143:6 146:4 153:3 156:14 157:12 159:24 160:2,17,21 162:9 163:7 183:25 184:2,9,18 184:21 186:2 189:13 192:10 220:12,15,15,17 221:24 222:2,4 223:7 233:1 234:16,18,19 235:8 235:13,15 238:15 240:4 241:9 242:6,14,22 243:15 243:16 244:4,24 246:2 247:15 255:5,11 258:23 260:4,10 263:7 265:18 266:1 269:10,12,15,19 269:24 270:9,10,13,15 277:17 278:25 292:14 311:11 316:18 326:3 330:21 334:23 335:1,23 336:5 338:3 346:7 350:2 350:22 356:20 362:3,13 362:21 resume [13] 198:3 202:12 223:15 226:20,23,23

227:1,4,11 229:10,12 363:18,21 resumed [2] 196:24 227:15 **RESUMES** [1] 2:2 retest [2] 245:24 246:12 retested [10] 10:19 242:5 242:7,18 243:1 245:3,20 247:23 279:4 350:5 retesting [31] 17:17 26:23 32:23 34:1,12 35:12 68:1 78:24 80:24 81:23 133:10,10 144:20 145:21 147:1 160:20 182:12 220:4 234:16,18 234:19 235:8 238:11,23 265:23 270:18 279:2 281:6 333:18 334:19 338:3 retrieval [1] 114:4 **retro** [4] 351:9 354:3,5 354:20 **return** [7] 144:9 165:16 166:22 171:14 182:19 183:2 340:14 **returned** [14] 73:16 144:25 182:9 183:1 195:18 218:16 220:2 221:6 230:20 234:9,15 238:16 252:23 253:6 **returning** [1] 124:3 reveal [2] 197:2,11 review [62] 27:8 30:17 31:16 33:5 45:4,8,10 96:19 101:3 108:18 112:25 116:7 117:22 119:21 122:21 130:24 131:15,20,25 138:16,22 151:24 156:8 165:10,17 182:4 184:1 195:14,25 196:19 202:10 219:24 220:16 232:4 237:8,9 240:23 242:4,8,11 243:8 243:12,14 247:17 256:19 258:20 259:4 269:9 270:15 280:20 283:12 292:23 333:21 334:5,8 334:13,21 335:1,3,4

338:7 365:7 reviewed [26] 6:15 17:22 18:8 19:15,19 33:12 47:9

195:16,23 221:10 231:15 232:6 247:19 248:18 254:15 259:20,21 270:3 270:9 278:2 316:3 reviewer's [1] 149:8 reviewers [19] 87:3 96:1 96:14,17 97:16 112:4 148:21 150:18 152:2 166:2,4 167:14 171:14

165:12 179:1,4 182:7,13

250:6 reviewers' [2] 156:19 196:11

187:1,7,13,18 224:20

reviewing [2] 168:3 338:5

reviews [31] 45:14 46:1

46:9 49:21 85:11 95:11 100:6 110:5 116:9 120:7 121:9 122:7,9 129:15,17 129:23 130:2,9,17 131:3 131:7 150:9.11.22.23.25 156:12 197:2 198:1 200:20 221:5

revising [1] 3:22 **revision** [1] 311:22 rework [1] 31:10 reworking [2] 31:6,11 **right** [124] 1:8 5:13 9:6 9:23 13:20 16:24 23:22 25:22 32:4,10 34:17 47:4 48:4 65:6 67:24 68:8 72:22 80:6 83:6 87:6 91:25 93:6 102:22 103:2 105:20 109:16,24 113:13 124:5 126:15 128:7 130:4 134:2 138:3 139:15 141:4 142:9,21 144:22 147:15 155:11 159:5,18 161:3 163:19 165:1 168:13 173:2 179:17,23 180:2 184:13 185:19 191:18 192:21 194:23 196:13 199:20 200:7,11,23 203:3 203:19 204:2 206:25 209:9.11 212:10 213:25 215:7 218:13 219:4 223:5 224:6 229:1 236:6,11 238:19 241:24 248:4 254:18 255:8 257:6 261:16 265:1 268:9 270:20 280:7,18 281:10 282:7 283:2,18 284:12 285:16 295:7 308:13.22 310:6,24 311:19 313:5 317:23 319:4 328:23 330:17.20.24 336:2.7 340:9,19 350:12 351:5 352:23 355:16 356:24 358:20 361:1 362:18

372:9 **right-hand** [1] 46:20 **rightfully** [1] 124:15 rightly [4] 40:5 223:14 319:8 365:16

363:16 366:10 371:11

rise [1] 97:6 road [1] 40:1 **Robert** [2] 46:19 231:8 **role** [13] 31:7 52:18,21 62:24 203:16,17 204:17 208:19 210:14 211:19,23 275:7,9

roles [1] 203:1 **Rolf** [1] 1:8 route [2] 254:6 260:13 routine [1] 70:25 **Rumboldt** [7] 140:15 142:6 155:9.11 157:25 158:7 253:15

run [3] 359:2,3,5 **running** [1] 203:9 **Russell** [1] 1:12

-S-

S[2] 47:9 95:3 **safe** [4] 196:1,20 199:25 227:22

safely [1] 227:15 sample [1] 99:14 **samples** [16] 17:15,17 17:21 18:7 19:16 32:14 32:22 36:21,24 117:23 183:23 184:7 185:17 189:7 247:22 270:11

Sandra [3] 1:7 2:3 3:3 **satisfy** [1] 187:18

saw [4] 287:15,19 307:9 358:25

says [21] 47:25 50:1 73:6 111:5,10 166:10,20 168:9 173:12 176:25 183:1.22 195:13 267:10 268:6 269:8 285:3 286:7 289:25 307:20 328:6

scanning [2] 347:15 348:2

schedule [2] 163:3,22 scheduled [2] 194:6 253:7

screen [1] 330:20 screening [3] 361:5,7 361:20

scroll [3] 6:8 159:20 308:9

scrolling [1] 113:21 se [2] 47:12 61:15 **search** [4] 103:18,20 104:6,17

seated [3] 3:2 105:23 280:10

second [15] 5:16 10:16 10:22 32:19 43:1 45:3 101:23 110:3 117:20 147:5 157:23 159:9 160:8 294:18 316:8

secretariat [51] 7:19,23 8:13,18 9:19 10:10 30:9 30:15,16,25 31:1,4,5,10 31:16 34:25 46:17 47:6 47:10 49:1,3,10,19 72:6 230:13,25 231:16 232:4 233:4,6 234:24 235:9,14 237:22 238:6 243:23 247:13 248:23 251:13 256:7 262:25 274:10 297:11 312:10 313:10 314:9,21 315:7 324:25 339:5,22

Secretariat's 131-8:1 46:23 47:16

secretary [1] 7:5 **section** [5] 47:22 96:19 130:16 283:8 310:14

see [55] 6:8 10:21 12:3 17:13 30:24 35:22 38:9 46:20 49:25 50:2,4 64:24 67:14 71:25 107:22 113:21 122:17 126:6

128:3 131:7 140:17 149:12,22 152:21,25 159:14 165:9 169:20 174:14 179:20 181:19 182:2 215:13 218:8 231:6 240:3 249:3 254:5 259:8 283:4 284:9 310:18,23 314:5 316:6.12.13.23 322:24 324:14 325:3 335:12 348:2 359:14 360:18

seeing [7] 113:15 124:23 129:12,25 149:23 151:19 316:16

seek [1] 215:20

seeking [2] 213:2 334:18 seem [14] 40:16 41:25 67:7 98:11 128:13 143:19 163:13 184:17 249:23,23 339:12 343:1,11 358:17

send [16] 7:2 26:24 49:10 56:21 92:11 106:11 141:6 252:11 258:10,13 259:13 260:11 267:19 272:4 276:4 325:6

sending [17] 27:2 33:15 33:15 39:8,10,13 43:2 89:8,11 91:17,19,21 99:20 272:8 308:11 314:19 321:9

sends [3] 88:1 99:7 279:22

senior [1] 237:7 sense [27] 58:15 74:11 74:13,17 76:11,13 88:20 95:17 96:3 104:1,4,11 104:15 116:9,13 118:22 122:3 204:11 284:20 315:12 368:5.9 369:20

369:20,25 370:20 371:15 sensed [2] 39:20 226:24 **sensing** [1] 25:12

sensitive [1] 114:9

sent [53] 7:6 10:13 17:15 17:19,20 18:1 30:21 32:14 36:15.25 44:11 72:9,12,13,24 99:14 112:12 132:2 163:15 164:1,4 183:23 189:7 238:2,10,23 240:3 256:18 257:15,17 258:15 259:9 268:2 269:4,5,14 270:14 272:1 283:20,23 284:15 284:17 286:15 292:6 316:9 321:3 324:21 325:6 325:8 328:17 329:16 339:4 365:6

sentence [2] 88:23 89:7 **sentiment** [3] 75:12 371:13,18

separate [1] 156:13 **September** [15] 3:16 5:11 11:3 13:3,4,9 15:1 18:1,11 45:7,15 66:22 87:4 97:17 212:19

series [1] 3:12 **serious** [2] 62:14 67:16 served [1] 63:5

service [2] 45:9 74:20 **services** [12] 36:5 70:21 70:24 74:22 76:23 176:20 208:6 211:15 231:14 276:19.20 320:1 **session** [6] 55:15,17 56:1 76:21 150:4 367:8 sessions [1] 54:17 **set** [8] 18:21 27:4 53:7,15 61:7 80:20 87:21 151:2 **sets** [1] 20:21 seven [1] 115:3 **share** [3] 35:24 53:17 132:13 **shared** [11] 4:20,23 52:13 94:18 116:3 125:25 176:19 226:16 298:23 323:5.13 **sharing** [1] 79:13 **shed** [7] 95:22 97:1 121:22 148:24 160:13 200:20 286:10 **sheet** [4] 344:4 348:1 349:15 352:4 **Sheree** [4] 72:1,2,5,14 **short** [3] 14:20 164:19 324:1 **shortly** [10] 34:3 87:9 222:23 223:1 229:12.25 230:19 234:14 252:22 372:13 **show** [5] 158:14 216:24 233:11,20 289:10 **showed** [6] 3:13 75:5 114:6 117:2 120:10 295:14 **showing** [2] 151:13,15 sic [3] 218:24 292:16 356.6 **side**[1] 191:16 sidetracked [1] 259:19 **sign** [7] 292:24 293:7,15 294:3 295:3 339:14 365:7 **signature** [2] 177:16,17 **signed** [8] 178:17,17 179:1,4,5 302:17 339:3 339:23 **significance** [6] 57:12 72:8 73:11 75:10 102:16 292:17 **significant** [7] 62:20,23 63:16,20,22 147:18 349:6 significantly [3] 347:17 348:3,16 **signing** [2] 293:23 313:17 **similar** [10] 7:21 10:14 10:24 60:2 102:5 106:7 159:7 169:17 219:23,23 Simmons [1] 1:10 **Sinai** [41] 17:17,21 26:23 26:24 27:9 34:2,11 35:13 36:16 39:13 43:5 45:6 68:1 86:23 95:2.19 141:23 142:5 145:20

146:4 162:13,13 163:15 183:23 189:8,14 196:4 196:21 220:12 222:4 227:24 238:11 247:23 269:11,14,16 270:10,14 271:19 279:2 281:7 **single** [1] 56:25 **site** [1] 96:18 **situation** [16] 29:14 30:5 58:4 65:14 66:1,12 71:21 77:13 79:21 99:11 117:25 123:8 130:22 131:18 260:15 371:1 **situations** [4] 29:16 31:25 32:1 204:16 **six** [5] 33:3 34:4 64:21,22 278:3 **skills** [1] 141:12 slashed [1] 169:22 **slices** [1] 114:15 **slides** [3] 16:6,20 19:18 **slight** [2] 270:2,16 **slightly** [2] 123:6 356:12 **slow** [1] 34:5 **small** [5] 164:3 184:23 279:14 308:18 372:12 **Society** [1] 1:15 **solicit** [1] 37:22 **solicitor** [2] 233:23,24 someone [5] 70:24 94:14 94:16 98:1 206:2 **sometime** [6] 13:2 34:8 214:7,24 223:4 301:1 **sometimes** [7] 50:5.6 59:15 71:10 80:10,11 173:24 **somewhat** [1] 102:4 somewhere [2] 153:13 354:15 **soon** [4] 127:24 156:2 260:12 279:10 **sorry** [35] 9:1,4 29:4 64:21 84:11 129:8 133:11 139:19 140:9,10,11 145:10 181:15 213:25 220:5 225:15 239:7 259:19 267:11 280:23

282:4,24 293:25 299:19 302:13,21 306:7 317:13 318:10 326:19 327:10 328:5 342:14 358:13 365:23 **sort** [2] 55:13 90:13 **sound** [2] 252:5 373:10 source [1] 223:17 sources [1] 190:19 **speak** [15] 7:1 70:15 75:15 76:19 78:8 81:10 81:17 108:22 111:24 151:12 167:25 201:16,19 255:16 370:8 **speaking** [9] 75:23 76:7 81:12 99:9,19,25 251:1 264:4 325:15 **speaks** [1] 81:15

specific [26] 26:17 37:18 41:23 55:11 71:4 74:3 78:10 120:5 124:16 131:14 167:18 168:2,22 170:17 171:1 193:21 197:18 198:22 199:1,15 202:2 216:6 305:16 337:9 369:4,7

specifically [36] 4:9 17:3 20:1 24:23 35:10 51:3 62:15 76:3,10 81:11 94:23 97:14 98:1 100:8 107:5 111:23 126:23 132:1 136:13 145:4 151:12 166:13 167:8,10 198:18 200:13 201:3 223:11,20 251:1 299:25 300:4 332:18 339:25 341:1 345:16

specifics [5] 49:8 93:25 120:14 225:7 300:18

specimens [5] 36:15 39:8,10,12,17

speculate [1] 91:13 **speed** [1] 79:18 **spelling** [2] 305:1 311:6 **spend** [5] 144:8 213:1 232:23 341:22 358:8

spending [1] 174:4 **spent** [2] 212:21 247:24 **spoke** [11] 20:3,10 35:9 35:19 99:23 108:22 111:20,23 124:6 290:10 305:6

spoken [4] 299:11,12,15 305:5

spot [2] 105:15 194:16 **spring** [8] 42:3 142:25 148:21 152:2 214:7,24 224:24 334:25

St [22] 17:16 26:22 32:14 36:15 102:2 134:17,25 135:10 144:16 195:21 196:23 198:4 199:25 202:13 221:9 223:15 227:1,15 229:12 271:21 373:7,11

Stacey [1] 1:16 staff [30] 25:7 28:11,13 41:7,22 42:16 56:10,12 56:25 57:5 58:10,12 62:5 62:6,15,19 141:23 164:10 176:14 187:24 197:15 212:14 224:7 237:7 315:18 342:11,21,24 364:14 368:2

stage [1] 188:9 stages [2] 184:1 220:16 staining [1] 114:7 stamped [1] 231:10 stand [2] 2:2 351:25 standardized [1] 114:17 stands [2] 89:21 352:3 start [2] 26:20 139:11 started [1] 168:16

starts [1] 212:19

state [4] 86:1,5 88:11 190:14

statement [18] 12:16 88:13 93:15 185:22 189:25 190:6 192:2,4 220:22 222:7,11 242:12 243:13 249:20 254:14,20 254:23 258:17

statements [1] 358:25 **states** [2] 234:7 292:5 **stating** [5] 192:15,23 193:3 234:8 242:12 **statistical** [10] 333:17 334:13,16,21 335:4,11

statistics [3] 333:22 334:6,9

335:16 336:11,17 348:11

status [27] 17:8 32:8 36:23 78:25 86:15 114:19 229:5 247:11 248:1 260:5 260:9 270:3,4,17 277:16 278:17 280:23 281:2 283:4 285:23,24 286:8 297:17 307:22 330:14 338:2,13

stay [1] 303:9 **step** [5] 69:6 118:3 127:4 144:14 159:23

steps [13] 118:2 127:13 128:14,16,17 156:3 159:22 176:17 247:15 255:5 277:18 311:11 330:21

sticks [2] 104:24 105:2 still [38] 76:6 118:23 119:24 122:22 128:1,22 147:25 149:21 156:21 157:3,6,11,13 163:6 169:20,24 170:3,23 177:18,18 180:19 186:15 199:5 219:10 221:12,17 221:21 226:5 240:15 247:11 254:5,24 255:1 255:12 268:12 337:5,10 362:2

stop [1] 107:3 **stopped** [1] 26:22 **story** [5] 8:21 10:1 47:24 139:18 314:14 **stress** [1] 279:2

stood [1] 172:22

strike [1] 73:15 struck [2] 167:6 213:13 structure [3] 61:18 64:16 79:23

structured [1] 55:13 **struggling** [1] 370:17 **subject** [10] 139:20 142:2 146:2,15 147:12 216:12 217:1,5 302:24 303:1

submit[3] 32:21 34:19 85:10 **submitted** [2] 46:6 47:4 **subsequent**[11] 44:20 103:19 138:11 139:2

148:10 152:16 206:18,23

206:25 297:24 325:17 **subsequently** [1] 292:8 **substitute** [1] 58:6 **successfully** [1] 114:2 **such** [6] 131:10 299:17 304:25 324:18 335:19 347:6

suggest [1] 259:20 **suggested** [14] 51:23 92:4 118:1,13 159:21 195:24 196:18 219:8 227:18,20 261:25 290:20 340:12 360:17

suggestion [1] 262:17 **suit** [5] 217:8 294:17,17 305:1 309:8

suite [3] 21:1 310:24,25 **summarize** [1] 237:24 **summarized** [3] 232:20 233:2 245:11

summarizing [2] 273:16 292:3

summary [10] 237:16 243:3 280:24 281:8 283:8 285:13 286:6,6 295:21 344:1

summer [3] 66:21 141:22 146:20

summertime [1] 77:10 **Sunday** [2] 240:21 315:23

support [2] 37:8 213:4 **suppose** [5] 30:23 31:8 89:15 203:1 355:7

supposed [3] 53:1,2 211:21

surgeons [3] 33:16 43:3 44:11

surprise [1] 348:7 **surprised** [2] 141:20 348:5

surrounding [1] 138:7 **survivors** [2] 361:4 362:11

switched [1] 58:1 **system** [19] 4:19,21 10:18,20 12:1 62:14 71:2 103:8 104:2 105:5 113:24 114:1,5,9,11 115:3 180:20 272:12 313:5

-T-

table [27] 2:1 232:21 233:3,3,5 236:13,16 237:21 240:20 245:14,16 252:9 257:15,17 261:9 261:22 263:13,15 267:18 268:19,21 269:2,6 291:7 315:24,25 344:1

takes [1] 161:18 taking [22] 31:4,5 34:8 35:6,13 68:1 142:4 146:3 146:25 160:6,8 170:18 202:11 208:13 215:1 220:18 245:10 263:10 273:15 296:4 348:11 362:11

talks [1] 180:3

Tansy [22] 3:15,20,20 15:9,9 58:23 59:15 72:24 73:6,8 77:19 80:24 81:4 140:8,11,18 141:14,20 142:14 338:24 360:15,16

Tansy's [4] 140:10,16 140:19 142:15

task [1] 203:8

tasked [4] 51:8,11,23 62:6

technicians [1] 12:2 technologist [6] 45:6 86:23 95:2,10,19 229:9

technologists [2] 114:24 116:11

telephone [2] 293:13 325:12

telling [6] 21:2 129:6 166:8 189:24 251:3 299:22

tells [2] 118:22,22 ten [5] 16:7,16,22 218:6 353:6

tend [10] 111:8 112:6,9 112:13 144:15 150:2 169:9 172:5 190:16,24

tended [1] 191:15

term [3] 253:9 259:12 316:2

terminology [1] 269:4 terms [37] 10:24 27:21 28:3 39:25 58:14 61:2 68:22 103:22 112:16 118:19 124:17 140:6 141:4 144:18 159:8 160:7 162:5 172:17 182:23 183:9 188:10 192:15,18 206:4 216:7 218:7 247:3 261:1.13 262:13 266:10 288:1,7 338:12 344:14 356:18 362:15

terribly [1] 252:6

test [55] 27:2,8 34:5 96:23 113:24 114:2,3 118:4,7 141:1,21 142:12 143:6 153:2 156:14 157:12 159:24 160:2,17 163:7 184:18,21 185:16 186:2 189:13 192:10 220:12,15 221:24 222:2.3 232:25 235:13,15 238:15 240:4 243:16 244:4 258:23 260:4,9 263:7 265:18 269:12,19,24 270:12 292:14 316:17 326:2 334:23 335:1,23 336:5 362:13

tested [3] 10:17,23 133:8 testimony [2] 43:17 371:6

testing [61] 1:2,13 26:22 27:1 43:5 48:19 96:20 97:7 117:23 118:3 121:23 128:14,16,19 143:22

159:22 160:7,8 162:21 163:6 165:12,19 182:6 183:22 184:7 185:17,22 189:7 195:16,21,25 196:2 196:10.19.20.22 198:3 199:25 202:13,17 203:11 205:15 218:18 220:5 221:8 223:15 226:20.23 226:25 227:4,12,14,23 229:10,11 278:18 279:1 333:18 363:18,21 373:4

tests [12] 133:6 141:24 163:14 164:3 269:10,14 281:3 286:9 297:18 361:5 361:7,20

text [1] 287:11 thank [12] 32:4 91:25 105:17.25 129:10 157:19 175:8 195:3 214:2 277:7 280:12 330:13

Thanking [1] 139:17 **Thanks** [4] 3:20 87:1 142:15 282:11

themselves [1] 187:18 **there'd** [2] 44:13 188:22 **thereafter** [5] 34:3 87:9 222:24 229:12 230:1

they've[1] 171:5 **thickness** [1] 114:15 thinking [4] 9:14 58:18 103:22 347:16

third [6] 133:5 182:3 186:6 190:2 260:2 278:19

Thomas [1] 140:7 Thomas-Pennell [1] 139:13

Thompson [11] 46:19 231:8 301:5,12,15,17 322:6,9,11,19,23

thought [10] 141:23 171:8 185:25 225:10,21 226:2 273:13 287:3 296:8 306.8

three [24] 33:6 34:2 36:22 37:22 39:16 54:6 61:23 62:2 67:15 75:25 146:21 168:12 194:8 211:2 212:3 212:16 224:3 227:19 240:10 292:1,13 293:21 347:22 349:3

three-pager [1] 272:8 threshold [9] 349:22 351:6,13 352:19 353:3.5 354:7,15,21

through [41] 3:18 21:11 26:18 27:18 28:3 37:4 42:11 46:8 48:7 52:22 70:21 71:2 76:17 83:4 101:21 105:4 110:1 113:20 117:3 125:24 161:21 164:10 169:7,22 184:23 207:7 208:10,24 210:8 215:1 224:8 242:3 247:24 252:10 295:14 303:19 311:4 329:13 344:25 358:6 371:6

throughout [4] 43:18 53:19 364:24 371:10

tied [1] 253:17 tight [1] 14:7

Tilley [19] 13:14 16:4 81:6 84:16,22 85:3,17 85:19 88:20 89:18 90:14 91:9,14,19 92:4 101:14 360:11 367:14 370:15

Tilley's [2] 87:19 93:1 **timeline** [1] 89:2

times [9] 10:6 28:13 71:5 81:15 99:23 144:6 190:12 193:6 365:11

timing [1] 79:6 tissue [6] 114:12,15 117:23 183:23 184:7

270:11 tissues [1] 238:10 **titration** [1] 114:6 today [8] 48:1,1 259:5

259:19 273:19 275:20 280:21 360:12 **together** [3] 15:15 30:2

253:8 tomorrow [7] 95:7 142:13 259:5 260:11 275:20 280:22 360:14

tonight [1] 360:10 too [5] 73:22 114:9 308:10 336:7 350:9

took [17] 5:4 18:9 23:7 54:2 60:21 98:16 182:2 232:19 262:15,19 294:17 295:14 299:23 316:2 345:12 347:6 367:12

top [3] 43:1 101:8 292:1 **topic** [2] 132:18 139:3 topics [2] 55:21 60:15 **Toronto** [2] 144:5

total [8] 212:24 238:10 238:22 240:4 244:18 345:7 346:6 349:10

220:13

touch [2] 87:25 274:18 towards [1] 166:6 **traffic** [1] 104:23 **trained** [1] 12:3 transcribed [1] 373:9 **transcript** [1] 373:3 travelling [2] 241:5

270:24 tread [2] 184:20 189:17 **treated** [2] 74:10 270:1

treating [1] 270:1 **treatment** [7] 17:24 33:17 43:4,11 44:6,14 281:6

treatments [1] 44:19 **tried** [1] 330:7 **trigger** [1] 8:20

triggered [2] 303:13

304:7 **trip** [1] 267:10 trouble [1] 94:20 **true** [3] 75:25 366:19 373:3

trust [1] 175:25

try [11] 15:15 28:19 64:8 96:21 97:18 137:6 161:5 272:1 302:22 366:13 368.1

trying [28] 83:23 88:19 118:23 119:24 136:20 143:14.16 156:21 202:25 253:7 261:9 266:17 267:12 271:6,9,24 272:25 273:14 289:24 290:1 299:3 302:8,15 303:16 304:21 305:20 331:6

tumor [3] 27:4 334:24 334:25

turn [4] 28:15 30:13 340:3 372:11

turn-around [1] 162:6 turned [1] 47:5

TV [1] 360:10

two [44] 7:22 20:20 22:8 54:7 63:5 80:3,9 88:6 94:1 102:4 106:7 109:9 110:5 114:10 144:8 150:3 156:12 168:12 194:7 212:16 224:3 227:18 233:20 238:17 279:14 282:9,18 284:20 294:8 294:14 295:23 296:5 305:14 308:18 309:2.4.9 309:25 318:4 331:15 348:1 362:20,23 368:19

typed [4] 65:3 240:22 315:25 336:23

types [1] 130:8 typing [1] 6:18

-U-

Uh-hm [2] 253:2,11 **ultimately** [5] 7:13 30:8 173:9 204:9 231:5

Um-hm [6] 208:8 211:5 211:11 258:25 273:18 281:21

unable [2] 220:21 222:6 **unaware** [1] 81:2 **uncertainty** [3] 191:20 191:25 193:15

uncovered [2] 150:23 150:25

under [40] 14:7 17:8 28:13,13 32:7,24 33:5 36:21 76:14 117:20 118:1 118:12 130:10 132:22 162:19 177:23 182:3 195:12,24 217:5 219:23 220:9 242:1 255:4 260:2 260:5 275:8 277:15,17 278:3 280:23,24 281:8 285:12 286:6 310:14 328:5 338:1 340:11 362:22

understand [64] 3:21 9:8 21:6 26:11 27:15

29:5.9 40:1 43:10 44:12 44:21 46:16 51:8 52:25 54:22 57:4 67:20 69:10 73:11 92:24 93:18,20,21 94:3 96:14 99:9 101:2 102:25 104:20 105:10 121:8,13 124:8 141:15 142:6 148:13 150:12 179:14,23 188:9 189:6 202:25 203:5,15,17 213:12 226:19 227:3 231:5,22,25 251:15,19 254:5 263:17 299:15 303:14 331:10 344:16 345:22 351:7 363:4,19 367:22

understands [2] 99:18 292:3

understood [54] 9:25 16:9 21:10,19 30:8 34:1 39:6 40:5 68:17 91:18 94:3 96:17 121:9 129:15 130:1,8 132:14 148:17 156:20 170:22 183:14 184:10 186:15,23 188:13 196:5 203:22 205:20,25 210:13 222:23 223:14 225:3,11 226:22 228:17 229:5 234:21 257:14 318:3,10,13,17 319:8 321:14 324:17 325:2 333:21 334:4.21 344:19 353:23 365:16 367:25

undue [1] 39:21 **unfolded** [1] 252:16 **unfolding** [1] 255:12 unfortunately [1] 311:24

unless [10] 41:22 77:12 104:5 209:23 242:7 243:1 245:25 246:13 370:20 371:15

unlikely [1] 113:25 **unusual** [9] 24:24 25:13 25:24 26:3 49:9 171:8 274:7,8,13

up [64] 5:2 7:13 22:1 27:4 31:2 35:7 39:8 50:8,11 61:7,21 68:18,23 69:3 69:11 70:3 73:8 79:18 83:10 84:8 87:13 89:21 90:1 92:16 93:16 97:21 101:4 105:25 108:19 109:8 110:2 111:6,10 113:8 136:10 138:3 139:17 142:16 144:24 148:15,22 161:21 163:1 163:10 168:13 172:22 184:25 213:14 216:24 222:16 225:22 229:4 241:12 245:12 249:18 253:17 262:15 273:24 286:2 289:10 296:25 297:10 341:6 344:16

update [18] 46:4 84:24 85:23 86:24 88:7,24 92:23 95:7 97:21 99:8 99:10 102:9 142:11 154:18 318:7,20 360:13 360:13

updated [5] 4:15 229:14 317:10,25 319:13

updates [1] 27:17 **updating** [2] 59:19 154:17

upset [1] 324:4 **urgency** [3] 314:19,21 315:12

urgently [2] 92:5 93:4 **used** [15] 12:2 13:4 14:6 24:11 25:18 29:15 69:15 106:16 107:6 108:8 236:15 241:15 291:6 292:13 325:22

using [5] 28:5 106:23 114:1 141:23 288:13

usual [2] 42:19 158:2 **usually** [3] 37:12 56:10 144:4

-V-

vacation [6] 64:11 230:20 234:8 252:23 253:6,14

vaguely [2] 143:19 163:13

various [12] 59:12 73:20 75:1,3 76:8,20 79:25,25 81:13 88:16 183:25 220:16

vast [2] 183:24 184:8 **Ventana** [6] 10:19 11:13 11:18 12:4 114:9,11

version [57] 8:1 15:8
23:18 46:23 47:16 65:1
65:2,3 108:14 134:22
177:20,25 178:17 179:1
179:4,6 180:17 277:9
279:13,22 284:14,22
285:13 286:1 287:15,16
287:19,22 288:2,9 295:15
295:16,21,24 297:9,10
297:23 307:15,20,20,23
308:18,25 309:2,11,15
309:18,24,24 310:2,20
321:6,9 323:13 328:16
329:17 336:23

versus [2] 65:14 66:2 **view** [8] 51:12 62:12,13 132:13 155:21 162:18 211:7 212:5

viewed [2] 258:16 336:10 **visit** [3] 11:14,18 96:18 **volume** [1] 73:7

-W-

W [1] 102:17 wait [5] 68:4 93:9,13 279:4 315:3 waiting [10] 187:13 210:22 221:13,17,21 228:6,18,22 261:8 334:16 walk [2] 73:15 125:23 walking [2] 304:11,14 wanting [1] 91:17 wants [2] 78:8 243:14 ways [1] 88:16

weak [1] 114:6 weakly [1] 17:18 website [1] 47:23

week [11] 27:13 65:10 77:5,9 142:17 252:23 253:13 274:21 321:16,18 368:22

weekend [3] 15:14,17 237:9

weekly [1] 161:24 **weeks** [6] 34:3,4 45:12 146:22 344:21 363:14

Wegrynowski [1] 224:14

Wegrynowski's [1] 226:14

Western [1] 1:16 whatsoever [1] 217:10 whereas [1] 19:17 wherever [3] 105:14 277:4 366:2

whole [4] 74:7 254:14 295:23 347:21

Williams [72] 13:14 16:4 16:10,25 18:12,20 19:3 19:21,24 24:7 47:25 81:3 87:25 92:6,11,13,15 93:4 94:25 95:9 99:7,9,19,21 99:23 100:1,4,15 101:2 101:14,16 102:3 108:17 108:21,23 109:3,6 110:2 110:10,16,20 111:6,7,21 111:25 112:17,24 115:5 115:12 117:10 118:20 119:19 120:20 123:19 124:6 125:23 127:7,16 145:2 148:6,11 150:10 150:12 152:10 153:14 164:9 196:9 197:19 206:16 236:1 326:12 370:15

Williams' [1] 126:19 Wiseman [2] 55:23 194:5

Wiseman's [2] 193:24 193:25

wish [7] 30:20 105:8 207:5 260:14 262:22 291:24 308:10

wished [1] 49:15 wishes [2] 81:14 203:24

wishing [1] 202:21 within [40] 31:3 34:2 37:16 45:9,11 48:14 54:20 55:1,4 58:16,20 60:20,23 63:15 65:16 76:13 85:15 94:15 102:5 104:11 106:7 130:20 203:7,21 212:15,24 247:12,12 262:24 276:18

276:20 307:24 309:12 319:24 320:1 326:6 337:14 344:20 346:15 361:13

without [17] 26:1 98:17

102:15 106:10 134:16 135:10 309:16 310:3 311:22 312:6,16 313:8 313:12,17 324:10 339:14 364:19

witnesses [3] 29:6 203:23 204:9

women [14] 67:17 68:2 278:16,22 281:1,3 285:8 285:18 286:8 297:16 307:21 356:19 362:3,21

women/families [1] 279:3

wondering [19] 28:2 72:13 77:18 87:17 88:17 104:8,21 123:5 140:5 196:15 199:1 200:18 228:17 229:3 294:2 300:4 353:21,25 354:10

word [45] 191:19,20 285:24 286:9,11,14,16 286:19 287:10,16,20,23 288:3,8,13,14 289:1,4,8 289:10 290:16,20 292:12 292:13 293:21 294:5,14 294:16,17 295:9,22 296:4 297:4,18 300:14 305:1 307:4,25 309:6,6,8 310:3 310:5,23 331:15

worded [2] 169:4 183:3 wording [23] 10:24 48:22,24 167:2,4 169:17 183:11 184:15 185:3,7,9 185:9,11 189:9 190:25 192:14 218:25 219:6,7 219:11 228:19 255:15,16

words [5] 75:11 169:22 170:18 192:23 254:1

work-load [1] 162:12 **worked** [5] 23:6 25:8 41:7 76:1,5

workload [2] 34:10 62:20

works [7] 29:6 47:7 56:10 164:11 197:16 224:7 276:13

world [1] 28:21

write [4] 17:14 85:3,17 125:12

writes [3] 3:20 291:22 292:2

writing [6] 91:1 111:15 140:18 141:14 266:16 360:8

written [18] 11:25 12:4 18:25 19:4,12,21 20:8 24:12 79:1 82:16 117:16 129:1 167:12 168:22 238:21 247:16 250:18 333:1

wrong [27] 64:22 126:13 127:25 128:1,17 142:3 146:3,17 147:7,17 148:8 148:25 150:14 153:24 156:3 161:7 196:10 197:3 200:14 206:13 215:5 216:9,24 218:9 362:2,20 364:1

wrongly [4] 40:5 223:14 319:8 365:17

wrote[1] 67:7

-Y-

year [12] 34:9 77:9 144:4 144:11 178:6 221:7 298:14 301:1 337:5,15 340:15 362:1

years [3] 94:1 212:16 364:24

yesterday [8] 3:13 16:2 16:9 74:8 75:5 279:13 308:17 365:20

yet [6] 33:13 121:1 126:12 157:3 236:2 359:2

yourself [24] 25:19 47:8 58:21 59:14 72:1 73:1 77:18 101:17 116:18 139:7 147:17 183:11 200:3 218:22 221:3 234:8 235:19 259:18 266:22 278:5 322:8 360:2,23 370:11

Yvonne [4] 260:10 268:11,17,19