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Western  
Health

18 Aug 08

Abellan

In the ER/PA file.

Kan

cc: Eaton

A Shared Commitment to Quality

Accreditation 2007

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18 Aug 08

TC = Robert Thompson / CEOs / ADM / UP Med Serv  
re ER / PR Follow-up

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- Robert offered to cover any OT costs related to further searching.
- BN likely to be tabled as evidence @ COI.
- wants to get alternate search strategy off ground.
- Kovic responded on behalf of 3 CEOs external to Eastern and indicated disagreement = need for search. Indicated that Government should direct & conduct review if deemed necessary.
- Robert asks for assurances that we will provide access to lab leaders / IT / Director of Pathology if government proceeds.
- further TC to follow the s/w the Director of Pathology

**Jenkins, Ken**


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**From:** Gillam, Susan  
**Sent:** Friday, August 15, 2008 1:59 PM  
**To:** Hoddinott, Lisa; Jenkins, Ken  
**Subject:** FW: Face to Face Meeting on August 18, 2008 with CEOs and VPs Medical Services

-----Original Message-----

**From:** Brewer, Donna [mailto:dbrewer@gov.nl.ca]  
**Sent:** Friday, August 15, 2008 12:01 PM  
**To:** Brewer, Donna; John Peddle; Boyd Rowe (E-mail); Karen McGrath (E-mail); Louise Jones (E-mail); Gillam, Susan  
**Cc:** Barbara Parsons (E-mail); Joyce Penney (E-mail) (E-mail); Payne, Suzanne; Tela (Theresa) Blake (E-mail); Strong, Jim  
**Subject:** RE: Face to Face Meeting on August 18, 2008 with CEOs and VPs Medical Services

Further to my previous email. Here is the correspondence for CEOs being forwarded on behalf of Robert Thompson.

To CEOs

I would like to discuss the following matter with you during your meeting on Monday, August 18.

Since mid-March, eleven new ER/PR patients have come to light that should have been retested in 2005/06. Eight of these patients were discovered through calls from the patients or their families, and three were discovered through further file searches (in Central Health).

As you know, the ER/PR Database project carried out by NLCHI was a compilation of existing data plus filling in data gaps. It relied upon the previous searches performed by RHAs to identify the patients who were retested. While we have known the possibility existed that new patients would come to light, the identification of eleven patients is higher than expected.

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The idea of performing a new search for patients within Eastern Health was considered during the spring but not undertaken because of uncertainty that it would generate any newly found patients. At that time, there was only one recently self-identified patient. Now that we have 11 new patients (7 deceased; 4 living), the case for conducting a new search has changed. On a regional basis, the 11 cases break down as follows: Eastern - 4; Central - 4; Western - 2; and Labrador/Grenfell - 1.

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New search strategies have been examined by NLCHI on the Meditech system in Eastern. A preliminary test for one year showed that the strategy was broad enough to include the newly identified case, but it would still require significant effort to review pathology reports to determine if additional cases existed. To expand this process province-wide, we propose the following three step approach:

1. NLCHI will interview the pathologists or other personnel in each region who conducted previous searches. This will allow for a consistent understanding of search criteria and methods. The interviews will allow for a determination of whether or not a new search process needs to be conducted for each year in each region.
2. Based on the interviews, a single year test will be conducted in each site where a newly identified case exists to ensure the strategy is working.
3. All years for all sites will be reviewed.

NLCHI will require the cooperation of your organizations to conduct this process. NLCHI will first discuss the process with your clinical chief of pathology. At each site they will need access to laboratory staff to participate in reading the pathology reports. These staff will be provided with necessary orientation to identify missing cases on the same basis as other regions. The Department will provide funds for any overtime incurred. NLCHI will

collaborate as necessary to ensure everyone is satisfied with the process.

I look forward to discussing this with you on Monday.

Robert Thompson  
Secretary to Cabinet (Health Issues),  
Chair, Task Force on Adverse Health Events  
709.729.4092 (p)  
709.682.8946 (c)

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**From:** Brewer, Donna  
**Sent:** August 15, 2008 11:25 AM  
**To:** 'John Peddle'; Boyd Rowe (E-mail); Karen McGrath (E-mail); Louise Jones (E-mail); Susan Gillam (E-mail)  
**Cc:** Barbara Parsons (E-mail); Joyce Penney (E-mail) (E-mail); Suzanne Payne (E-mail); Tela (Theresa) Blake (E-mail)  
**Subject:** RE: Face to Face Meeting on August 18, 2008 with CEOs and VPs Medical Services

John  
I just called and left a voice mail with you.

Robert Thompson just left my office. He needs 20 minutes or so on Monday to speak to the CEOs with respect to ER/PR patient identification process. He will be sending an email or I will be sending one on his behalf later this afternoon to further elaborate.

John when should I advise Robert that we will call him on Monday.

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**From:** John Peddle [mailto:jpeddle@nlhba.nl.ca]  
**Sent:** August 14, 2008 11:17 AM  
**To:** Boyd Rowe (E-mail); Karen McGrath (E-mail); Louise Jones (E-mail); Susan Gillam (E-mail); Ken Jenkins; Michael Jong; Oscar Howell; Bradbury, Cathi M.; Brewer, Donna  
**Cc:** Barbara Parsons (E-mail); Joyce Penney (E-mail) (E-mail); Bennett, Pam; hellensparkes@westernhealth.nl.ca; Suzanne Payne (E-mail); Tela (Theresa) Blake (E-mail); denise.dunn@easternhealth.ca; Arlene Scott; Mary Haynes (Executive Assistant to Senior Director)  
**Subject:** RE: Face to Face Meeting on August 18, 2008 with CEOs and VPs Medical Services  
**Importance:** High

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I am being asked what is the agenda for the Aug 18th meeting in Corner Brook. There is no agenda.

At the July 10th CEOs meeting there was a discussion on Urology services and the problems being experienced with Urology along with problems in other medical service areas.

At the July 24th CEOs meeting there was a discussion on the numbers of physicians that each of the RHAs had identified as being needed for each region. Also at the July 24th meeting, I briefed the CEOs on what was being requested by the Department on a Provincial Physician Recruitment and retention plan.

When the decision was made on July 10th by the CEOs to have this meeting, the main focus was on problems being experienced by each of the RHAs with the delivery of medical services in their region. There was discussion over how one RHA could possibly help another RHA with service delivery (1 RHA may have OR space and time, but no physician and another RHA have the physician); over referral patterns and other issues. At subsequent meetings the discussion focused on Physician HR planning, recruitment and retention.

Based on what the CEOs have discussed, each of you will need to prepare yourself for discussion on medical issues and the problems being experienced. Whatever information you can prepare and share will be helpful. I have no agenda prepared, if someone wants to itemize the issues they can forward their comments and I will prepare an agenda.

To the CEOs who participated in the discussions at the CEO meetings, is there anything you want to add.

John

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**From:** Netta Wells

**Sent:** Friday, August 01, 2008 3:00 PM

**To:** Barbara Parsons (E-mail); Boyd Rowe (E-mail); Don Keats (donkeats@gov.nl.ca); Joyce Penney (E-mail) (E-mail); Karen McGrath (E-mail); Louise Jones (E-mail); Pamela Bennett (PBennett@gov.nl.ca); Susan Gillam (E-mail); Suzanne Payne (E-mail); Tela (Theresa) Blake (E-mail); Ken Jenkins; Michael Jong; Oscar Howell

**Cc:** CathiBradbury@gov.nl.ca

**Subject:** CEO - Face to Face Meeting on August 18, 2008

Good afternoon all:

The meeting of August 18, 2008 will take place in the Board Room at Western Memorial Hospital, Corner Brook beginning at 10:30a.m.

The purpose of the meeting will be to discuss - *Physician Human Resource Services*.

Thank you.

*Sheila*

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Sheila Andrews-House  
NLHBA

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**Jenkins, Ken**

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**From:** Gillam, Susan  
**Sent:** Friday, August 15, 2008 1:57 PM  
**To:** Hoddinott, Lisa; Jenkins, Ken  
**Subject:** FW: New Cases

FYI  
Susan

-----Original Message-----

**From:** Louise Jones [mailto:Louise.Jones@easternhealth.ca]  
**Sent:** Friday, August 15, 2008 8:51 AM  
**To:** John Peddle; McGrath, Karen; Gillam, Susan; Boyd Rowe  
**Subject:** FW: New Cases

The attached e-mail is not what we want to see.

As you know there have been a number of people who have self identified this year. Robert has indicated that there have been 12 when he called me this week. He wanted to try other ways to search the data that we had discussed this winter and I was not in agreement at that time indicating that we continue to ask people to call us if they have any questions. Also there was no consensus with the IT people as to an approach to use to get any better results. Remember that NLCHI spent 8 months developing this database already at that point in time and Robert had indicated to me that NLHBI was finished their work it would be up to me to decide whether I wanted to do more work to see if we could identify more people..Also remember that both the government and ourselves continue to say that we have no assurance that the database is complete.. It is my understanding that they tried 5 different search strategies looking for the persons name who already was a patient who self identified. The only way that they were able to do the search was because they knew what they were looking for.. in fact the search identified over 800 clients at the HSC site database only. From my perspective if we did not know her name we would have then to individually review all of the 800 plus files for 1 year to see if there was anyone in the group that meet the criteria for testing.

We need to talk about this before we get Robert on the line on Monday. This is the needle in the haystack that he is going after. From my perspective it will be significant work.. But what you need to know is that he is developing a briefing note for the Minister.. the database will be resubmitted to the COI and he is concerned that the province will be deemed not to have done everything to try and find individuals for retesting

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So just to give heads up.

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So my question is do we make ourselves available to Robert on Monday? Can you respond and then I would ask John to follow-up with Robert if he has not already done so to identify a time..

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Have a good weekend

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**From:** Thompson, Robert [mailto:rthompson@gov.nl.ca]  
**Sent:** Thursday, August 14, 2008 4:44 PM  
**To:** Louise Jones  
**Subject:** New Cases

Reza and Barry tested the methodology for a single year and did pick up the self-identifier for that year. So it looks like the methodology is sound. You may wish to confirm.

Tomorrow I will develop a proposed process for a new search strategy. It may be slightly different for each region as each one has different information systems.

I understand that CEOs are meeting in CB on Monday, so that would be a good time to discuss it with everyone (by conf call for me).

Robert

Robert Thompson  
Secretary to Cabinet (Health Issues),  
Chair, Task Force on Adverse Health Events  
709.729.4092 (p)  
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