

<p style="text-align: center;">COMMISSION OF INQUIRY ON HORMONE RECEPTOR TESTING</p> <p style="text-align: center;">BEFORE THE HONOURABLE JUSTICE CAMERON - COMMISSIONER</p> <p style="text-align: center;">June 2, 2008</p> <p>Appearances:</p> <p>Bernard Coffey, Q.C. Commission Co-counsel Sandra Chaytor, Q.C. Commission Co-counsel</p> <p>Rolf Pritchard/Stephen Mills Her Majesty in Right of NL</p> <p>Jane Hennebury Doctors Kara Laing et al</p> <p>Daniel Simmons Eastern Regional Integrated Health Authority</p> <p>Chesley Crosbie, Q.C. Members of the Breast Cancer Testing Class Action</p> <p>Jennifer Newbury Canadian Cancer Society (NL Division)</p> <p>David Eaton/Stacy O’Dea. Central, Western and Labrador-Grenfell Regional Integrated Health Authorities</p>	<p style="text-align: center;">TABLE OF CONTENTS</p> <p>MS. SUSAN BONNELL - RESUMES THE STAND</p> <p>Examination by Bernard Coffey, Q.C. Pgs. 1 - 177 Examination by Chesley Crosbie, Q.C. Pgs. 177 - 240</p> <p>Discussion re exhibit Pgs. 240 - 241</p> <p>Examination by Jennifer Newbury Pgs. 241 - 334</p> <p>Certificate</p>
<p style="text-align: right;">Page 3</p> <p>1 COMMISSIONER: 2 Q. Please be seated. Mr. Coffey? 3 MS. SUSAN BONNELL, EXAMINATION-IN-CHIEF BY BERNARD 4 COFFEY, Q.C. 5 COFFEY, Q.C.: 6 Q. Thank you, Commissioner. Ms. Bonnell. 7 MS. BONNELL: 8 A. Good morning. 9 COFFEY, Q.C.: 10 Q. Ms. Bonnell, on Friday you had told us about 11 the briefing of the minister on November 23rd, 12 and you’d also spoken about the meeting 13 between yourself and Ms. Mundon and Mr. Tilley 14 and Mr. Abbott on December 4th. During the 15 briefing of the minister on November 23rd did 16 the issue of communications come up? 17 MS. BONNELL: 18 A. Yes, we did certainly talk about the 19 preparation that we were undertaking for the 20 media briefing. 21 COFFEY, Q.C.: 22 Q. Okay. And what was said by the minister or 23 her staff about that? 24 MS. BONNELL: 25 A. I don’t recall any specific direction coming</p>	<p style="text-align: right;">Page 4</p> <p>1 from anyone on that briefing. We did talk 2 about, we did talk about really the fact that 3 we were doing it and that we were going to 4 attempt to give some explanation as to, you 5 know, the testing itself, impact on patients 6 and that’s all I recall us talking about with 7 the minister on that day. 8 COFFEY, Q.C.: 9 Q. Was there any expression of concern by anyone 10 from the department or the minister’s own 11 actual office about the matter of the 12 deceased? 13 MS. BONNELL: 14 A. Yes, there was. I do recall there being an 15 exchange about the number. I think that they 16 perhaps had not even seen that number prior to 17 that date. That’s certainly the impression 18 that I had. 19 COFFEY, Q.C.: 20 Q. And were there any cautions expressed as to 21 how that was to be handled or not handled? 22 MS. BONNELL: 23 A. I don’t recall. I just, I do remember that 24 there was concern that the number of deceased 25 was, perhaps it was larger than they</p>

Page 5

1 anticipated it would be.

2 COFFEY, Q.C.:

3 Q. And -

4 MS. BONNELL:

5 A. And there was some discussion about that and

6 the fact that, you know, the fact that

7 patients would have passed away in the period

8 of time was not necessarily due to whether or

9 not they would have received Tamoxifen, there

10 was some discussion of that.

11 COFFEY, Q.C.:

12 Q. If we could, please, Exhibit P-0180? This is

13 an e-mail from Tansy Mundon, November 27th,

14 2006 to a number of senior staff in the

15 department. But one thing I wanted to bring

16 to your attention was apparently in this

17 exchange or interview by Jonathan Crow, Chris

18 O'Neill-Yates and Peter Dawe, Mr. Dawe is

19 quoted as saying--this is before the, of

20 course, the December 11th briefing?

21 MS. BONNELL:

22 A. Yes.

23 COFFEY, Q.C.:

24 Q. He is quoted as saying "This is the type of

25 information that should be made public.

Page 7

1 George Tilley, Oscar Howell, Heather Predham,

2 yourself, Dr. Denic, Dr. Laing, Pat Pilgrim

3 and this a CBC Here and Now interview and this

4 is one of November 23rd, 2006. And this is

5 the one -

6 MS. BONNELL:

7 A. It's the same story, yes.

8 COFFEY, Q.C.:

9 Q. It's the same story. In fact, it was actually

10 broadcast Thursday, November 23rd.

11 MS. BONNELL:

12 A. Um-hm.

13 COFFEY, Q.C.:

14 Q. And Mr. Dawe, at the bottom of that first page

15 of the exhibit, the quote, "What happened?

16 Why was this mistake or this series of

17 mistakes", that then leads into "What have we

18 done about it now, what has the system done

19 about it to fix it?" So, ma'am, if we look

20 then at P-0181? This is a series of e-mails

21 involving Ms. Mundon and yourself and, in

22 fact, Ms. Barrington, November 27th, 2006.

23 And on November 27th at 1:43 p.m. Ms. Mundon

24 asks yourself and Ms. Barrington, "As a

25 follow-up to the briefing last week just

Page 6

1 Obviously it's a concern that it's taking up

2 to 18 months and we still don't have that

3 information being made public." And then Ms.

4 O'Neill-Yates asks him, or comments, "Dawe

5 says the lack of information is distressing

6 for breast cancer survivors and their

7 families." And then Mr. Dawe is attributed

8 with the following quote, "What happened? Why

9 was this mistake made or these series of

10 mistakes? That then leads into what have we

11 done about it now, what has the system done

12 about it to fix it?" Now, ma'am, if we could,

13 please, bring up Exhibit P-0178? And that's

14 November 27th. P-0178, please? This is your

15 e-mail of November 22nd, 2006 to Ms. Mundon

16 saying "We are going to brief Peter Dawe next

17 Friday, December 1st and are going to arrange

18 media for December 11th. Oscar can make

19 himself available whenever this week." So as

20 of November 22nd, a Wednesday, you proposed to

21 brief Mr. Dawe on Friday, December 1st. If we

22 could bring up, please, Exhibit P-1408? This

23 is an E-mail from Leona Barrington, Friday,

24 November 24th, 2006 5:01 p.m. to a number of

25 senior individuals within Eastern Health,

Page 8

1 wondering if a date has been confirmed for a

2 briefing with the media and Peter Dawe?" And

3 you responded at 2:42 that day saying, "Tansy,

4 the media briefings are going to be set up for

5 December 11th. We will try to make time for

6 Peter on that day, but I'm not sure if we will

7 be able to fit him in. He won't be getting

8 the advance 'goodwill' presentation I offered

9 him last week. You", I gather you meant to

10 type, "You throw someone an olive branch and

11 they whip you to death with it. Fool me

12 once." And Ms. Mundon responds at 5:01 the

13 same day, "Thanks, Susan, for your

14 information. John Abbott is attempting to set

15 up a meeting between him, George, you and I

16 regarding ER/PR and communications. I think

17 they were looking at Monday of next week."

18 Now, what was this about, Ms. Bonnell, why the

19 change of heart about Mr. Dawe?

20 MS. BONNELL:

21 A. I think we were concerned that if we were to

22 give Mr. Dawe as advance a briefing as we had

23 originally planned, that he may go to the

24 media with the information presented in the

25 briefing before we had the opportunity to do

Page 9

1 that. It's unfortunate, it is an e-mail
 2 between myself and a colleague and I've
 3 mentioned to you before that it's colourful
 4 language and I--it's embarrassing to see it
 5 there like that, but that was the essence of
 6 it, that there was concern that the
 7 information with such an advanced briefing
 8 would be made public before we had the
 9 opportunity to do that.

10 COFFEY, Q.C.:
 11 Q. What is that "You throw someone an olive
 12 branch and they whip you to death with it.
 13 Fool me once." What specifically were you
 14 speaking about to Ms. Mundon?

15 MS. BONNELL:
 16 A. Just as I've said, that we were hoping to
 17 bring Mr. Dawe into it earlier but that we
 18 felt that if we did that, that we may find
 19 ourselves having to respond in the media to
 20 the media briefing before we provided the
 21 briefing to the media ourselves.

22 COFFEY, Q.C.:
 23 Q. What had he done to occasion that view?

24 MS. BONNELL:
 25 A. It's just that -

Page 11

1 done that interview in advance of him being
 2 informed that he was getting a briefing or
 3 not, he'd have to speak to that. But we got a
 4 sense from that that it was possible that he
 5 would go to the media with the information
 6 that we gave him.

7 COFFEY, Q.C.:
 8 Q. Wouldn't it be a simple enough thing just to
 9 simply ask him beforehand, simply say, get his
 10 agreement that he wouldn't?

11 MS. BONNELL:
 12 A. I suppose so, yes.

13 COFFEY, Q.C.:
 14 Q. I gather that's what you anticipated in the
 15 beginning when you were scheduling December
 16 1st for December 11th?

17 MS. BONNELL:
 18 A. That's correct.

19 COFFEY, Q.C.:
 20 Q. Larger briefing. You were prepared to give
 21 him one on December 1st?

22 MS. BONNELL:
 23 A. Yes.

24 COFFEY, Q.C.:
 25 Q. So what had he done to -

Page 10

1 COFFEY, Q.C.:
 2 Q. Because this is November 27th, that e-mail?

3 MS. BONNELL:
 4 A. Yes.

5 COFFEY, Q.C.:
 6 Q. And we have November 24th and that's a Monday.
 7 November 24th you got a transcript of the CBC
 8 interview of November 23rd and, in fact, on
 9 Monday, November 27th that same transcript of
 10 the CBC interview on November 23rd gets
 11 distributed throughout government, senior
 12 people within the Department of Health.

13 MS. BONNELL:
 14 A. Um-hm.

15 COFFEY, Q.C.:
 16 Q. So did it have, your expression of views here,
 17 have anything to do with what he said on
 18 November 23rd?

19 MS. BONNELL:
 20 A. At that point we had informed Mr. Dawe or it
 21 was my understanding that Mr. Dawe was aware
 22 of the fact that he would be getting an
 23 advanced briefing and that we were going to
 24 the media with a briefing. I'm not sure if
 25 the timing is right, if Mr. Dawe had actually

Page 12

1 MS. BONNELL:
 2 A. He'd done nothing to occasion a comment of
 3 that nature.

4 COFFEY, Q.C.:
 5 Q. I take it other than say publicly that "This
 6 is the type of information that should be made
 7 public. It's taken up to 18 months, we still
 8 don't have it." And he's going--and he's
 9 suggesting the public and the patients should
 10 want to know "Why was this mistake made or
 11 this series of mistakes?"

12 MS. BONNELL:
 13 A. Yes.

14 COFFEY, Q.C.:
 15 Q. So the fact that he was, I suppose from his
 16 perspective, doing his job?

17 MS. BONNELL:
 18 A. I don't argue with Mr. Dawe's job at all. It
 19 was just that the timing of it, from our
 20 perspective, was that after being informed
 21 that we were going to be doing a media
 22 briefing, that that wasn't referenced in the
 23 article after being informed that he would be
 24 getting a briefing and that that information
 25 was forthcoming. Mr. Dawe may have even said

Page 13

1 that to the media that day and they may have
 2 chosen not to report it that way, I have no
 3 way of knowing. But we made a decision not to
 4 give him the advance briefing. And I don't
 5 recall if we got him in--if we were able to
 6 get him in the morning before we did the
 7 briefing or if it was the next day before we
 8 did interviews, but he was presented with a
 9 briefing.
 10 COFFEY, Q.C.:
 11 Q. On December 11th?
 12 MS. BONNELL:
 13 A. 11th or 12th, first thing in the morning, I'm
 14 not sure.
 15 COFFEY, Q.C.:
 16 Q. Which would be, in fact, after the media--on
 17 the 12th would be the day after the media
 18 briefing?
 19 MS. BONNELL:
 20 A. Yes, but before we had done any media
 21 interviews.
 22 COFFEY, Q.C.:
 23 Q. The view expressed in your e-mail set out at
 24 Exhibit P-0181, I take it that at that moment
 25 that was your view, anyway, that "You throw

Page 15

1 MS. BONNELL:
 2 A. - the expressions of comment there I have to
 3 attribute to myself alone.
 4 COFFEY, Q.C.:
 5 Q. Oh, okay, involved in that decision then could
 6 you name the individuals who would have
 7 concurred in that, in that approach, not give
 8 him an advanced briefing, who was that?
 9 MS. BONNELL:
 10 A. Dr. Howell, Ms. Pilgrim, Dr. Laing, it's my
 11 understanding that we all agreed that -
 12 COFFEY, Q.C.:
 13 Q. Dr. Denic, I take it, would he be involved?
 14 MS. BONNELL:
 15 A. I don't recall Dr. Denic expressing an opinion
 16 in one way or the other.
 17 COFFEY, Q.C.:
 18 Q. So I'm just naming kind of the ones in the
 19 group, as it were, so I'll retract Dr.
 20 Denic's. So I'll just go through them. Ms.
 21 Pilgrim, Dr. Howell were of your view, Dr.
 22 Laing was of your view, you recall. Was Mr.
 23 Tilley?
 24 MS. BONNELL:
 25 A. I don't recall Mr. Tilley being involved in

Page 14

1 someone an olive branch, they whip you to
 2 death with it. Fool me once." as you put it.
 3 Did anyone else within Eastern Health hold the
 4 same sort of view, was it your sense that you
 5 weren't alone in this?
 6 MS. BONNELL:
 7 A. It wasn't my decision along not to provide him
 8 with the advanced briefing.
 9 COFFEY, Q.C.:
 10 Q. Who else was involved in that?
 11 MS. BONNELL:
 12 A. My supervisors in this regard.
 13 COFFEY, Q.C.:
 14 Q. Who were they?
 15 MS. BONNELL:
 16 A. It was the opinion of the individuals who were
 17 involved in preparing for the briefing and for
 18 giving Mr. Dawe the briefing, as well, that we
 19 would not give him an advanced briefing.
 20 COFFEY, Q.C.:
 21 Q. So that -
 22 MS. BONNELL:
 23 A. I think that the -
 24 COFFEY, Q.C.:
 25 Q. Who would that -

Page 16

1 that decision.
 2 COFFEY, Q.C.:
 3 Q. Whom else was involved?
 4 MS. BONNELL:
 5 A. That's it.
 6 COFFEY, Q.C.:
 7 Q. That's it. So they actually, you sat and
 8 discussed this, I take it?
 9 MS. BONNELL:
 10 A. We discussed when we would do the briefing for
 11 Mr. Dawe, yes.
 12 COFFEY, Q.C.:
 13 Q. And was that after your e-mail of November
 14 27th?
 15 MS. BONNELL:
 16 A. This particular e-mail?
 17 COFFEY, Q.C.:
 18 Q. Yes.
 19 MS. BONNELL:
 20 A. No.
 21 COFFEY, Q.C.:
 22 Q. Pardon?
 23 MS. BONNELL:
 24 A. No.
 25 COFFEY, Q.C.:

Page 17

1 Q. It was before that?

2 MS. BONNELL:

3 A. Yes.

4 COFFEY, Q.C.:

5 Q. Okay. So in writing this to the department's

6 communications director you had already gotten

7 the consensus view of the group, as it were?

8 MS. BONNELL:

9 A. Yes.

10 COFFEY, Q.C.:

11 Q. The individuals you've named?

12 MS. BONNELL:

13 A. Yes.

14 COFFEY, Q.C.:

15 Q. Did the subject matter of a briefing for Mr.

16 Dawe come up during the December 4th meeting

17 with Mr. Abbott and Tansy Mundon?

18 MS. BONNELL:

19 A. I don't recall it coming up, no. It may very

20 well have, but I don't remember it.

21 COFFEY, Q.C.:

22 Q. Now, ma'am, could you tell us, then, please,

23 about the preparation for the December 11th,

24 2006 media briefing?

25 MS. BONNELL:

Page 19

1 requested that kind of information. I would

2 have had the numbers as they were outlined in

3 the briefing note that we provided to the

4 minister on the 23rd, but in terms of rate of

5 error, it was much more complicated. We did

6 ask Heather to attempt to provide us with a

7 rate of error, which she did, but then when we

8 sat together and looked at the numbers, they

9 weren't, they weren't accurate, I guess. You

10 know, a lot of numbers were being thrown

11 around and one of the things about this time

12 was that we got confused by the numbers in

13 trying to come up with some percentages. You

14 know, originally we were looking at a

15 percentage over the total number of patients

16 that were tested for ER/PR and then we said,

17 well, we can't really do that because didn't

18 have anything--we didn't look at all those

19 patients, we only looked at the negative

20 patients. So then we tried to say, okay,

21 well, you take how many negative patients and

22 you subtract from them the patients that were

23 DCIS and you try and add in the ones with the

24 change in percentage but then, no, wait now,

25 you got to take them out because they don't

Page 18

1 A. There were a number of us who met a number of

2 times to prepare for the briefing. We talked

3 about what concepts we wanted to cover,

4 including, you know--and part of it, I guess,

5 was looking back at the coverage over the last

6 year and a bit to get a sense of what hadn't

7 been communicated effectively. And so we

8 talked about providing the media--it was a

9 technical briefing, so by its very nature

10 technical briefings would include information

11 about, you know, in this case the test itself,

12 how the test is performed, the impact of

13 Tamoxifen or other aromatase inhibitors on

14 patients and I guess the ultimate results of

15 our review, how that was done, the panelling,

16 those sorts of things so that they'd had some

17 understanding of what had gone into the last

18 year when we hadn't been speaking to them.

19 Myself and Ms. Barrington anticipated

20 that the media would be very keen on

21 information having to do with what went wrong,

22 the causative factors, and that they'd also be

23 looking for information on the rate of error,

24 they'd want numbers, percentages, and so in

25 the early days of preparation for this we

Page 20

1 contribute to rate of error. It was very

2 confusing. And I remember having

3 conversations where, you know, you're

4 literally banging your head on the table

5 trying to figure out a way to sort of present

6 the numbers and in all of it. Surprisingly, I

7 guess, we just sort of, we got so dazed by

8 trying to come up with a rate of error that it

9 seemed as if there was no way to present a

10 rate of error.

11 And our conversations came around to the

12 reason why we did this in the first place and

13 what was the reason why we did this in the

14 first place. And you remember I said to you a

15 couple of days ago, you know, back in August

16 and July, we said if one patient can be helped

17 by this, if treatments can be changed by this,

18 then that's what's most important. So we

19 focused in on the number of 117, which was the

20 individuals that were going to have or had

21 recommended treatment protocol changes.

22 And we felt we weren't in the position,

23 because of the class action suit, to focus on

24 the causative factors, that that would be

25 something that would be covered through that

Page 21

1 process. So we knew we weren't going to be
 2 talking about causative factors, but we did
 3 try to acknowledge the things that had
 4 happened in the lab since the reviews were
 5 done and as learning processes from that time.
 6 So we did present to the media a series of
 7 things that had changed in the laboratory to
 8 talk about the fact that we were confident
 9 that from this point forward, we'd be in a
 10 position to resume testing.
 11 We talked about how we were going to do
 12 this in such a way that the media had ample
 13 opportunity to ask questions. So we made a
 14 decision to divide the media into two groups.
 15 There's usually a lot of CBC reporters, so we
 16 said we'll do CBC in one group and we'll do
 17 the others in another group. That was the
 18 reason for the division there, because usually
 19 there's five or six or seven that come with
 20 CBC. And we originally tried to schedule the
 21 briefing for before the 11th, but somebody in
 22 the group was unable to--I think it might have
 23 been Dr. Laing was unable to do it that
 24 previous week, so we settled on the 11th, but
 25 discovered at the eleventh hour that Dr. Laing

Page 23

1 MS. BONNELL:
 2 A. Yes.
 3 COFFEY, Q.C.:
 4 Q. Okay, and so that's 50 percent of the
 5 questions or 50 percent of the subject matter
 6 is gone, okay?
 7 MS. BONNELL:
 8 A. Yes.
 9 COFFEY, Q.C.:
 10 Q. The subject matter is two things. The second
 11 part was they wanted to know about percentages
 12 of--or percentage rate of error or rate of
 13 change perhaps?
 14 MS. BONNELL:
 15 A. Yes.
 16 COFFEY, Q.C.:
 17 Q. Conversions -
 18 MS. BONNELL:
 19 A. Yes.
 20 COFFEY, Q.C.:
 21 Q. - to use the phrase used internally within
 22 Eastern Health, and Eastern Health had decided
 23 again before the briefing itself, that they
 24 were not going to respond to any such
 25 question?

Page 22

1 was not going to be able to do interviews that
 2 afternoon, and somebody else as well, I
 3 believe, and so we made the decision that we
 4 would ask the media to consider this a
 5 technical briefing. We'd give them a tour of
 6 the lab and then we'd do interviews the next
 7 day.
 8 In the end, the media wanted to report
 9 that day and we said, "sure, go ahead," and
 10 they reported that day and then we did follow-
 11 up interviews the next day.
 12 COFFEY, Q.C.:
 13 Q. That's -
 14 MS. BONNELL:
 15 A. That's in general.
 16 COFFEY, Q.C.:
 17 Q. Okay, well, with respect to the preparation,
 18 just to ask you, follow up on a point you just
 19 made, the media could ask questions, I take it
 20 that you understood that one of the primary--
 21 well, the two questions really they had were
 22 what were the causative factors for the
 23 changes and there was a decision made by
 24 Eastern Health that there'd be no response by
 25 Eastern Health to that question?

Page 24

1 MS. BONNELL:
 2 A. Yes.
 3 COFFEY, Q.C.:
 4 Q. So that's the other 50 percent of the subject
 5 matter the media were interested in?
 6 MS. BONNELL:
 7 A. Yes, that's correct. But I guess, you know,
 8 we talked a little bit Friday, Mr. Coffey,
 9 about the fact that we had really not said
 10 anything at all substantive anyway. We'd done
 11 a few interviews and had a few opportunities
 12 for media, very brief, between--basically over
 13 that last year, and certainly from my
 14 perspective, I thought it was essential that
 15 we speak to it, that we say something. We
 16 knew that the rate of error--and when I say
 17 "me" I mean myself and Ms. Barrington both
 18 knew that the rate of error, in particular,
 19 was a major factor for the media, and in
 20 retrospect, we certainly should have given the
 21 exact same briefing note that we gave to the
 22 media--given to the media the same briefing
 23 note that we gave to the Minister.
 24 COFFEY, Q.C.:
 25 Q. Now ma'am, with respect to that, you indicated

Page 25

1 that when you, as a group, got together and
 2 began to talk about this, as to what you would
 3 actually say to the media, that there was a
 4 lot of conversation about, you know, rates,
 5 numerators presumably and denominators, the
 6 arithmetic as it were?
 7 MS. BONNELL:
 8 A. Yes.
 9 COFFEY, Q.C.:
 10 Q. Now you had been there, I take it, in fact,
 11 well, you've told us you were there back in
 12 July of '05 when numbers like 16 over 25 were
 13 being used?
 14 MS. BONNELL:
 15 A. Yes.
 16 COFFEY, Q.C.:
 17 Q. So 16, the number have changed, conversions.
 18 MS. BONNELL:
 19 A. Yes.
 20 COFFEY, Q.C.:
 21 Q. The total number of tests retested in that
 22 batch.
 23 MS. BONNELL:
 24 A. Yes.
 25 COFFEY, Q.C.:

Page 27

1 Q. Yes.
 2 MS. BONNELL:
 3 A. That had a changed result. But when you look
 4 within that 317, this is where the
 5 complicating factor began, and in fact, it's
 6 what caused the problem in May in that the
 7 reporting in May was on the fact that it was
 8 300 individuals who had been denied treatment
 9 as a result of inaccurate testing, when in
 10 fact, if you look through those numbers,
 11 that's not accurate either. This is where the
 12 confusing factor arose. There's a group of--
 13 and I think in May, the reporting was as if
 14 this was 300 on top of the 117, making it 400
 15 and something. I mean, 148 of the
 16 individuals, or something like that, I've
 17 forgotten the number specifically, were ruled
 18 out by the panel. Some of the those
 19 individuals had already--were already
 20 receiving some form of aromatase inhibitor.
 21 Then there was another number with DCIS. Then
 22 there was the 13 that converted or were
 23 offered Tamoxifen even though their numbers
 24 didn't change because of the change in what we
 25 consider from the 30 to the 10 percent. It

Page 26

1 Q. So 16 divided by 25 is 64 percent. That's a
 2 simple conversion on that particular one.
 3 MS. BONNELL:
 4 A. On that particular one, yeah.
 5 COFFEY, Q.C.:
 6 Q. The particular one. So during the preparation
 7 for the December 11th 2006 media briefing, was
 8 any thought given to simply calculating the
 9 total number of tests that we had retested or
 10 total number of samples we had retested?
 11 MS. BONNELL:
 12 A. Yes.
 13 COFFEY, Q.C.:
 14 Q. For which we have reported results?
 15 MS. BONNELL:
 16 A. Yes.
 17 COFFEY, Q.C.:
 18 Q. And just -
 19 MS. BONNELL:
 20 A. We did talk about that and we did play with
 21 those numbers and we did look at those numbers
 22 and try and work out percentages, absolutely.
 23 We talked about 939, there was 317, is it?
 24 That accurate, Mr. Coffey?
 25 COFFEY, Q.C.:

Page 28

1 just got really confusing in trying to figure
 2 out who to exclude and to subtract from that
 3 percentage, and I'm not -
 4 COFFEY, Q.C.:
 5 Q. Was the -
 6 MS. BONNELL:
 7 A. We made the wrong decision.
 8 COFFEY, Q.C.:
 9 Q. Was the arithmetic--I take it that at some
 10 point, the 317 number got divided by 763 and
 11 you got 42 percent, I believe?
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. That about right, sound about right?
 16 MS. BONNELL:
 17 A. Yes, because the 176 deceased were excluded.
 18 Do you include them or you exclude them? We
 19 had results back on some of them, but not all
 20 of them because some of them were included and
 21 were retested inadvertently. It was just
 22 confusing.
 23 COFFEY, Q.C.:
 24 Q. Was the 42 percent figure or thereabouts
 25 arrived at or discussed during the lead up to

Page 29

1 the December 11th briefing?
 2 MS. BONNELL:
 3 A. There were a lot of percentages talked about.
 4 We probably landed on that 42 percent, but
 5 then moved off it because it's not accurate
 6 either because the deceased aren't included in
 7 that number.
 8 COFFEY, Q.C.:
 9 Q. But it certainly is accurate or at least it
 10 was thought to be accurate at the time for
 11 what was then thought to be the living?
 12 MS. BONNELL:
 13 A. Yes. That there was a conversion, yes.
 14 COFFEY, Q.C.:
 15 Q. Yes.
 16 MS. BONNELL:
 17 A. But whether the--you know, I mean, I guess our
 18 focus, rightly or wrongly, was on patients who
 19 could receive a change in treatment as a
 20 result of their retesting, and that's where we
 21 focused. I'll say it again, you know, in
 22 retrospect, I--and had I known, I don't--you
 23 know, it certainly wasn't something that I was
 24 consciously aware of that within a month these
 25 numbers would also be presented in a Court

Page 31

1 all of the numbers.
 2 COFFEY, Q.C.:
 3 Q. Well, I take it somebody must have said don't
 4 release some of the numbers.
 5 MS. BONNELL:
 6 A. Well, we didn't release any of the numbers.
 7 We focused on the 117.
 8 COFFEY, Q.C.:
 9 Q. But the 117 number was released?
 10 MS. BONNELL:
 11 A. Yes, because those were individuals that the
 12 panel recommended have a treatment change.
 13 COFFEY, Q.C.:
 14 Q. Yes, so there were a number of numbers
 15 released.
 16 MS. BONNELL:
 17 A. That number was released certainly, and the
 18 total number of individuals tested was
 19 released. We'd have to look at the briefing
 20 just -
 21 COFFEY, Q.C.:
 22 Q. Retested, the 939?
 23 MS. BONNELL:
 24 A. Yeah, yeah.
 25 COFFEY, Q.C.:

Page 30

1 document. I'm not sure anybody knew that
 2 those numbers, in particular, would be in that
 3 particular affidavit, but I may have argued
 4 harder for the release of those numbers at
 5 that time, but we didn't, and we should have.
 6 COFFEY, Q.C.:
 7 Q. Did you argue in favour of the release of the
 8 numbers yourself?
 9 MS. BONNELL:
 10 A. Oh absolutely, I did.
 11 COFFEY, Q.C.:
 12 Q. Like all the numbers from November 23rd?
 13 MS. BONNELL:
 14 A. Yes.
 15 COFFEY, Q.C.:
 16 Q. Okay, and who resisted?
 17 MS. BONNELL:
 18 A. Well, as I've explained to you, it was this
 19 sort of trying to figure out what numbers to
 20 present, and we got confused by the numbers,
 21 we really did.
 22 COFFEY, Q.C.:
 23 Q. From your -
 24 MS. BONNELL:
 25 A. There wasn't anybody who said don't release

Page 32

1 Q. The total number of patients over the period.
 2 MS. BONNELL:
 3 A. Yeah.
 4 COFFEY, Q.C.:
 5 Q. The 2,760 or so. So what I'm asking you,
 6 ma'am, is you were pressing--from your own
 7 perspective, you're telling us, you wanted to
 8 release, just let them out there?
 9 MS. BONNELL:
 10 A. When we first--when we initially got together
 11 -
 12 COFFEY, Q.C.:
 13 Q. Who made the decision not to release the 317
 14 number?
 15 MS. BONNELL:
 16 A. I can't give you a name of a person who said
 17 "we will not release the 317 number." It was
 18 a decision that we reached as a group
 19 together. I agreed with the decision at the
 20 time. I'm party to the decision making
 21 process. We made that decision collectively
 22 as a group in trying to prepare for that
 23 briefing. There was no one individual who
 24 said you will not release these numbers,
 25 including the lawyer, which is certainly

Page 33

1 something that was discussed. That was not a
 2 directive.
 3 COFFEY, Q.C.:
 4 Q. I'm sorry, what was not a directive?
 5 MS. BONNELL:
 6 A. Not to release the numbers.
 7 COFFEY, Q.C.:
 8 Q. Okay. If we could, Exhibit P-0183 please?
 9 Ma'am, this is an e-mail of December 7th 2006
 10 from yourself to Oscar Howell, Nash Denic,
 11 Kara Laing, Heather Predham, Leona Barrington.
 12 The subject is error rate. The attachments
 13 are technical briefing agenda, key messages,
 14 draft press release and technical briefing, a
 15 PowerPoint, the latter is a PowerPoint.
 16 "Attached to this e-mail, you will see
 17 Heather's explanation of our error rate. This
 18 is not to be shared with the media, but I
 19 thought you would like to see it for your own
 20 understanding." You go on to say "Leona and I
 21 are working on the Q and A's and will forward
 22 these to you all by tomorrow. Dr. Howell,
 23 Leona and I will be meeting on Sunday
 24 afternoon to review for Monday. You are
 25 welcome to join us for this briefing. Leona

Page 35

1 will begin the briefing session with an
 2 explanation this is an unprecedented event
 3 because of the class action, but that we
 4 believe we had an obligation to inform the
 5 general public about our outcomes and to
 6 provide the reporters with an opportunity to
 7 fully understand the test procedure and our
 8 actions since May 2005, so that they can
 9 report effectively on the issue. However,
 10 because of the lawsuit, we are limited in what
 11 we can talk about in terms of causative
 12 factors. This will have to be dealt with by
 13 the Courts. Secondly, we will not be talking
 14 about any individual cases. This information
 15 is protected and can only be discussed between
 16 the patient and care provider. Please review
 17 the attached. I am very open to your
 18 concerns, suggestions, ideas, etcetera.
 19 Following our meeting with Dan, I think I have
 20 a sense of how far we can go, but Heather will
 21 be sharing all of this, as well as the Q and
 22 A, with him and I hope to get his feedback as
 23 well."
 24 Now ma'am, this, you were forwarding on
 25 that point an e-mail from Heather Predham of

Page 34

1 will be booking two media briefings for Monday
 2 beginning at 10 and 11:30. The first briefing
 3 will be for three CBC reporters and the second
 4 will be The Telegram, The Independent, NTV and
 5 VOXM." So actually three -
 6 MS. BONNELL:
 7 A. There were more though.
 8 COFFEY, Q.C.:
 9 Q. Showed up, I take it?
 10 MS. BONNELL:
 11 A. Yes, yeah.
 12 COFFEY, Q.C.:
 13 Q. Okay. Well, at this point, I take it you
 14 anticipated three?
 15 MS. BONNELL:
 16 A. Yes.
 17 COFFEY, Q.C.:
 18 Q. Okay. You go on to say, "we will indicate to
 19 the media we will be available for interviews
 20 Monday afternoon. As part of the briefing, we
 21 would like to invite the media to visit the
 22 lab and see the Ventana. I am assuming this
 23 is at the Health Sciences Centre. If not,
 24 please clarify. Nash, we would like you to
 25 conduct this tour," and you go on to say "we

Page 36

1 December 7th 2006 at 8:14 a.m. to yourself,
 2 subject is error rate, and Ms. Predham, that
 3 morning, had written to you "Hi, Susan. Sorry
 4 about not getting this to you yesterday, but I
 5 needed some quiet and a cup of tea to get it
 6 clear in my head. Here's my explanation," and
 7 she gives an explanation as to--well, certain
 8 arithmetic, numbers and arithmetic, and then
 9 she says "the difference would be 11.97
 10 percent" and the 11.97 percent is bolded.
 11 Would that be the error rate, that figure
 12 there, that she has calculated?
 13 MS. BONNELL:
 14 A. No. Well, I guess that's her trying to
 15 calculate one, but -
 16 COFFEY, Q.C.:
 17 Q. Yes.
 18 MS. BONNELL:
 19 A. - this was not the error rate, because it was
 20 the--you know, and as I explained, we
 21 dismissed this one. We met and talked about
 22 it as not being what we could present.
 23 COFFEY, Q.C.:
 24 Q. Okay. So from your perspective then, when you
 25 got this, you looked at it and looked at the

Page 37

1 arithmetic and an explanation and you--you're
 2 telling the Commissioner that you thought, no,
 3 that -
 4 MS. BONNELL:
 5 A. No, well, the problem was the denominator,
 6 what's the denominator. It's usually what's
 7 the denominator in all--when we talked about
 8 it all the way through, and you know, if you
 9 look at it and say--originally we talked
 10 about, you know, the fact that if you go back
 11 to original media that we had done, Dr.
 12 Williams talked about, you know, there's 2,760
 13 patients who received ER/PR testing, and of
 14 those--you know, and then we tried to figure
 15 out how many percentage would be retested and
 16 this is the one time that that ten percent got
 17 mentioned, which has been mentioned repeatedly
 18 since then, which we never did--the ten
 19 percent, we never talked about with the media
 20 or this 11.9 percent.
 21 COFFEY, Q.C.:
 22 Q. Well, with respect, ma'am, I could bring up on
 23 the screen here, if it'll assist you, Dr.
 24 Williams told the media in October of '05 -
 25 MS. BONNELL:

Page 39

1 MS. BONNELL:
 2 A. That's correct.
 3 COFFEY, Q.C.:
 4 Q. Were you aware in the immediate lead up to the
 5 December '06 briefing that Dr. Williams had
 6 used the ten percent back in October of '05?
 7 MS. BONNELL:
 8 A. Yes.
 9 COFFEY, Q.C.:
 10 Q. Were the others in the group aware of it?
 11 MS. BONNELL:
 12 A. You'd have to ask the others in the group.
 13 COFFEY, Q.C.:
 14 Q. Okay. Well, I asked that because if it was
 15 discussed openly in the group -
 16 MS. BONNELL:
 17 A. No, it wasn't discussed.
 18 COFFEY, Q.C.:
 19 Q. Okay. So ma'am, who was actually charged then
 20 with preparing the media briefing materials?
 21 MS. BONNELL:
 22 A. Again, it was a bit of a collaborative
 23 process, but at the end of the day, Leona
 24 Barrington, who worked for me, would have been
 25 the--and me too, we would have worked

Page 38

1 A. In October '05, yes.
 2 COFFEY, Q.C.:
 3 Q. - using the ten percent. He used the ten
 4 percent.
 5 MS. BONNELL:
 6 A. Yes.
 7 COFFEY, Q.C.:
 8 Q. That's where the figure -
 9 MS. BONNELL:
 10 A. Yes, but he used the ten percent in relation
 11 to--if you look at the piece from The
 12 Telegram, it very clearly says, you know, of
 13 the total number of patients that have ER/PR
 14 testing. So he was thinking of the total
 15 number and based on that, making an estimation
 16 of ten percent.
 17 COFFEY, Q.C.:
 18 Q. Sure, but the ten percent figure was used?
 19 MS. BONNELL:
 20 A. Oh certainly, it was used at that point, but
 21 it was never used after that point, yeah, and
 22 it certainly wasn't used at the media
 23 briefing.
 24 COFFEY, Q.C.:
 25 Q. In December of '06, no.

Page 40

1 collaboratively on pulling together the actual
 2 materials. We pulled from a number of
 3 different sources. We pulled from the
 4 briefing that had been done for the physicians
 5 prior to that for the actual presentation,
 6 PowerPoint presentation.
 7 COFFEY, Q.C.:
 8 Q. Now the PowerPoint presentation, did you
 9 prepare any kind of text underneath,
 10 commentary text?
 11 MS. BONNELL:
 12 A. I provided some notes there that Dr. Howell
 13 and Dr. Laing--I don't think I--I mightn't have
 14 put anything there for Dr. Laing, but they
 15 were just notes for Dr. Howell. He didn't--
 16 they weren't a script. He didn't speak from
 17 them.
 18 COFFEY, Q.C.:
 19 Q. Here on this e-mail of 8:45 a.m. on the 7th of
 20 December said you're sending along certain
 21 materials to be reviewed by this group, and
 22 how much change occurred between December 7th--
 23 because we don't have actually what was sent,
 24 or I shouldn't say--we do have some of it. We
 25 do have material, I apologize.

Page 41

1 MS. BONNELL:
 2 A. Right.
 3 COFFEY, Q.C.:
 4 Q. We do have that. How much change occurred
 5 between then and the final version, December
 6 11th?
 7 MS. BONNELL:
 8 A. We don't have this material?
 9 COFFEY, Q.C.:
 10 Q. We do, I apologize. We do have this. We do
 11 have--we have the ones that are listed here.
 12 We don't have all of the--because as it turns
 13 out, December 11th, we have a number of
 14 different things. It's not just these--if you
 15 look up here on the screen, you'll see
 16 technical briefing agenda, key messages, draft
 17 press release and technical briefing.
 18 MS. BONNELL:
 19 A. So the Q and A's we don't have, they weren't
 20 included here, because they're not written -
 21 COFFEY, Q.C.:
 22 Q. They're not included in these because you're
 23 working on them.
 24 MS. BONNELL:
 25 A. Right.

Page 43

1 changed dramatically. The agenda probably
 2 didn't change very dramatically. The press
 3 release I think may have changed somewhat.
 4 COFFEY, Q.C.:
 5 Q. I suppose another way to ask you the same
 6 question is did you get a lot of feedback or
 7 concerns or suggestions because you had
 8 invited them here?
 9 MS. BONNELL:
 10 A. Yes. We did a lot of work over that weekend
 11 and certainly following Sunday. I don't--I'm
 12 afraid I would have no way of knowing without
 13 looking to see what feedback was received and
 14 I didn't do that in preparation for today.
 15 COFFEY, Q.C.:
 16 Q. Now without--and I take it then that what you
 17 now, at least from your perspective, as far as
 18 you know, whatever exists still, in terms of
 19 if any feedback was in writing, we should have
 20 obtained it.
 21 MS. BONNELL:
 22 A. If there was an e-mail, yes, certainly, yes.
 23 COFFEY, Q.C.:
 24 Q. Here you refer to following our meeting with
 25 Dan. Now that would be Dan Boone.

Page 42

1 COFFEY, Q.C.:
 2 Q. Now what I'm getting at, earlier versions of
 3 those.
 4 MS. BONNELL:
 5 A. Before the 7th of December, you mean or -
 6 COFFEY, Q.C.:
 7 Q. What I'm asking you really, ma'am, is this,
 8 how much of this change once you began to
 9 distribute it to the group?
 10 MS. BONNELL:
 11 A. I don't recall without sitting and comparing
 12 the information you have on the 7th and the
 13 information that we presented on the 11th.
 14 COFFEY, Q.C.:
 15 Q. Okay, and I wasn't going to take you through,
 16 kind of word for word, like a clause here or
 17 there, I'm asking about your sense, looking
 18 back on it, as to how much of your original
 19 product, yourself and Leona's original product
 20 actually got used, in terms of how much input
 21 from this group changed between--changed the
 22 product over time.
 23 MS. BONNELL:
 24 A. I don't remember without sitting and looking
 25 at--I don't think the key messages would have

Page 44

1 MS. BONNELL:
 2 A. Yes.
 3 COFFEY, Q.C.:
 4 Q. I'm not going to ask you what Mr. Boone may
 5 specifically have told you, but you do assert
 6 here, "I think I have a sense of how far we
 7 can go." So I take it having taken legal
 8 advice, you acted accordingly.
 9 MS. BONNELL:
 10 A. Yes, I guess I can't say more that either, can
 11 I?
 12 COFFEY, Q.C.:
 13 Q. Yes, and I appreciate that. Exhibit P-0184
 14 please? Now this, ma'am, is an e-mail of
 15 December 9th, 2006, 6:31 p.m., Saturday
 16 evening. This is to Oscar Howell, Heather
 17 Predham, Leona Barrington, Kara Laing, Nash
 18 Denic, Jane Bussey and Dan Boone and George
 19 Tilley. "Materials for tomorrow"--I take it
 20 there was going to be a meeting on a Sunday -
 21 MS. BONNELL:
 22 A. There was.
 23 COFFEY, Q.C.:
 24 Q. - to discuss the entire matter. And you have
 25 a number of attachment and you say, "Hello

Page 45

1 again everyone, following conversations with
 2 Nash, Heather, Dan and Oscar, I've revised the
 3 original drafts in anticipation for a meeting
 4 at 1:00 p.m. tomorrow. We can make further
 5 revisions at that point and I'll bring copies
 6 with me." And you talk about adding speaking
 7 notes to the slides, especially for Oscar,
 8 less so for Kara and Nash. "I guess the most
 9 significant change you will note from the
 10 original material is the lack of reference to
 11 a rate of error."
 12 MS. BONNELL:
 13 A. Uh-hm.
 14 COFFEY, Q.C.:
 15 Q. So I take it in the original materials there
 16 must have been some references?
 17 MS. BONNELL:
 18 A. In the original material we would have said
 19 something like we won't be talking about rate
 20 of error; whereas in this material we talked
 21 about conversion, as opposed to rate of error.
 22 There was no rates in the original material.
 23 COFFEY, Q.C.:
 24 Q. And, in fact, there's no rate in the final
 25 material either, is there?

Page 47

1 out like that, though."
 2 MS. BONNELL:
 3 A. That's just a reference to my--that's just the
 4 way I had written that sentence, that's all.
 5 COFFEY, Q.C.:
 6 Q. Well why -
 7 MS. BONNELL:
 8 A. It has no more meaning than that, we did talk
 9 about the 117.
 10 COFFEY, Q.C.:
 11 Q. Did you talk about the 104 and why the 13, the
 12 definition of positivity changed, do you
 13 recall if that was actually discussed?
 14 MS. BONNELL:
 15 A. We didn't spell it out like that, we did talk
 16 about the fact that included in that number
 17 were individuals whose, that--I believe in one
 18 of our Q and A's we talked about the fact that
 19 there was, and certainly I remember them
 20 talking at the briefing about the fact that
 21 included in that were individuals whose
 22 treatment changed because of a change in
 23 definition, because we also did talk about the
 24 changing definition in the briefing as well.
 25 But I don't think it was as clearly stated or

Page 46

1 MS. BONNELL:
 2 A. No, that's right, yes.
 3 COFFEY, Q.C.:
 4 Q. The word "conversion" was substituted for
 5 "error"?
 6 MS. BONNELL:
 7 A. That's right.
 8 COFFEY, Q.C.:
 9 Q. You acknowledge that this will be a major
 10 pressing point with the media?
 11 MS. BONNELL:
 12 A. Yes.
 13 COFFEY, Q.C.:
 14 Q. And you're suggesting "the approach we will be
 15 taking here is that a) we can indicate that an
 16 error has actually occurred and b) the whole
 17 process wasn't about identifying a rate of
 18 errors anyways, it was about identifying
 19 patients whose treatment would change as a
 20 result of the review. The number of
 21 individuals impacted has changed from 104 to
 22 117, taking into account that 13 individuals
 23 had no change in their results because of the
 24 new definition of positivity should have been
 25 offered Tamoxifen. We won't be spelling that

Page 48

1 as--I mean, it wasn't about Tamoxifen either,
 2 that's the other thing that we, you know, we
 3 talked about aromatase inhibitors and that,
 4 you know, it wasn't just Tamoxifen and all
 5 that stuff as well.
 6 COFFEY, Q.C.:
 7 Q. So why the reluctance to talk about 104 plus
 8 13 equals 117? Why the reluctance, just to
 9 spell it out as it were?
 10 MS. BONNELL:
 11 A. Well we were reluctant to talk about any
 12 numbers, as I've indicated to you already and
 13 I'm not really sure why we were.
 14 COFFEY, Q.C.:
 15 Q. So the reason for, I take it the media were
 16 not told or it was not specified to the media
 17 out of the 117 as to why their treatment had
 18 changed? Looking at the 117 number, the media
 19 couldn't tell what the reason might be for
 20 any--whether it was 5 or 50 patients whose
 21 treatment changed for one reason or another?
 22 MS. BONNELL:
 23 A. Because--yes, that's right.
 24 COFFEY, Q.C.:
 25 Q. So it was just 117 -

Page 49

1 MS. BONNELL:
 2 A. We talked about the process that had been gone
 3 through, that they had a conversion in their--
 4 we talked about conversions, we talked about
 5 the panelling process.
 6 COFFEY, Q.C.:
 7 Q. But now how many conversions?
 8 MS. BONNELL:
 9 A. No, no.
 10 COFFEY, Q.C.:
 11 Q. Including in the 117?
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. There was also, you go on to say, re: the
 16 dead, we must also be prepared, our statement
 17 will need to be in the almost ten year period
 18 individuals have died, either as a result of
 19 their breast cancer or for any one of numerous
 20 reasons. We did not retest these individuals
 21 because the purpose of the retest was to
 22 provide opportunities for individuals who
 23 could potentially benefit from a retest.
 24 However, if families would like to have their
 25 relative's samples retested, we can arrange

Page 51

1 COFFEY, Q.C.:
 2 Q. And 2760?
 3 MS. BONNELL:
 4 A. Yes, yes that was there as well.
 5 THE COMMISSIONER:
 6 Q. Of the total number of patients altogether.
 7 MS. BONNELL:
 8 A. Patients, yes.
 9 COFFEY, Q.C.:
 10 Q. Now ma'am, in preparing for this, I take it
 11 there was a meeting on December 10th, Sunday.
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. And who attended the meeting, do you recall?
 16 MS. BONNELL:
 17 A. On the 10th?
 18 COFFEY, Q.C.:
 19 Q. Yes, out of the final -
 20 MS. BONNELL:
 21 A. With certainty I can say that Dr. Howell was
 22 there, Dr. Laing was there, myself and Leona
 23 were there, I don't recall if Dr. Denic
 24 attended that meeting or not. I believe he
 25 did and I'm unsure as to whether Heather would

Page 50

1 that for them. We have no way of predicting
 2 how many, if any of these individuals would
 3 have died had they been offered Tamoxifen
 4 after their initial treatment for cancer."
 5 Ma'am, was the media told how many deceased
 6 samples had been retested?
 7 MS. BONNELL:
 8 A. No.
 9 COFFEY, Q.C.:
 10 Q. Why not?
 11 MS. BONNELL:
 12 A. I don't think the media were told any numbers
 13 that day on the deceased.
 14 COFFEY, Q.C.:
 15 Q. Well why not?
 16 MS. BONNELL:
 17 A. Because we didn't tell them any numbers, sir,
 18 we stuck with this 117 and that's what we
 19 talked about.
 20 THE COMMISSIONER:
 21 Q. So the only number referred to on that day was
 22 117?
 23 MS. BONNELL:
 24 A. Other than the total of 939, yes, that's
 25 right.

Page 52

1 have been there or not. I don't recall Mr.
 2 Boone being there and Mr. Tilley didn't
 3 attend.
 4 COFFEY, Q.C.:
 5 Q. Sorry, he did not?
 6 MS. BONNELL:
 7 A. No.
 8 COFFEY, Q.C.:
 9 Q. No. Did he acknowledge though that he was
 10 satisfied as to the materials.
 11 MS. BONNELL:
 12 A. Yes, he did.
 13 COFFEY, Q.C.:
 14 Q. Sent you an e-mail.
 15 MS. BONNELL:
 16 A. He did, uh-hm.
 17 COFFEY, Q.C.:
 18 Q. The final decision as to what would and
 19 wouldn't be said and the approach to be taken,
 20 were there any dissenters in the group that
 21 you recall?
 22 MS. BONNELL:
 23 A. No, not at that point, you know, prior to that
 24 I had already indicated that we were hoping to
 25 release more, but that we did not.

Page 53

1 COFFEY, Q.C.:

2 Q. And from the perspective of this Eastern

3 Health, the senior person in the room at the

4 time -

5 MS. BONNELL:

6 A. Would have been Dr. Howell.

7 COFFEY, Q.C.:

8 Q. Dr. Howell. And Dr. Howell at the time, I

9 take it, would be the least familiar with the

10 subject matter?

11 MS. BONNELL:

12 A. That's correct, which was essentially why

13 there would have been more speaking notes for

14 him, although Dr. Howell and I spent a fair

15 amount of time together that day trying to

16 make sure that he had the information that he

17 felt he needed, although I don't think he ever

18 felt very comfortable.

19 COFFEY, Q.C.:

20 Q. Ma'am, if I could, please, Ms. Bonnell, you're

21 going into a media briefing that you've

22 anticipated on and off for months, if not for

23 more than a year was going to have to be held.

24 MS. BONNELL:

25 A. Yes.

Page 55

1 you know, my understanding of it is only

2 marginally greater than any non-medical

3 professional's understanding would be. But I

4 did feel that there were a number of factors

5 that had contributed and that there was not

6 one thing that could be pointed to as a cause.

7 COFFEY, Q.C.:

8 Q. Did you have any sense at the time as to what

9 group or groups activities would have

10 primarily contributed to the problem?

11 MS. BONNELL:

12 A. No, no, I never felt that one group's

13 activities were a primary -

14 COFFEY, Q.C.:

15 Q. No, group or groups.

16 MS. BONNELL:

17 A. Well I always thought of it as being systemic,

18 that there were a number of groups that were

19 involved in it.

20 COFFEY, Q.C.:

21 Q. Namely?

22 MS. BONNELL:

23 A. Pathologists, technologists, administrators,

24 the oncologists and the system itself, the

25 usage of the system itself.

Page 54

1 COFFEY, Q.C.:

2 Q. At the time and as you said the first

3 question, one that Mr. Dawe had posed publicly

4 in November of '06 was what went wrong?

5 MS. BONNELL:

6 A. Yes.

7 COFFEY, Q.C.:

8 Q. And you understood that that was the first

9 thing, uppermost thing on the media's mind,

10 perhaps. You, yourself, at the time, what did

11 you think about what had gone wrong?

12 MS. BONNELL:

13 A. I believed that there was one--there was not

14 one factor that had caused what had happened,

15 that there were a number of factors that had

16 contributed.

17 COFFEY, Q.C.:

18 Q. They being?

19 MS. BONNELL:

20 A. I believed that there were concerns with the

21 way that the testing had been done from the

22 perspective of laboratory procedures. I

23 believe that there were concerns over

24 fixation; there were concerns over

25 improvements in the technology in antibodies,

Page 56

1 COFFEY, Q.C.:

2 Q. Usage of the machinery, not the machinery. If

3 we could, please, exhibit P-0104.

4 COFFEY, Q.C.:

5 Q. Now this is 8:52 a.m., an e-mail December

6 11th, 2006 from yourself to Ms. Mundon and

7 you're sending her, I take it, all of the

8 final version of the material?

9 MS. BONNELL:

10 A. Yes.

11 COFFEY, Q.C.:

12 Q. Why did you send it to Ms. Mundon?

13 MS. BONNELL:

14 A. For her information.

15 COFFEY, Q.C.:

16 Q. Had the department provided any input?

17 MS. BONNELL:

18 A. No.

19 COFFEY, Q.C.:

20 Q. Had they been asked to review it before?

21 MS. BONNELL:

22 A. No.

23 COFFEY, Q.C.:

24 Q. Is there any reason why they were not asked

25 to?

Page 57

1 MS. BONNELL:
 2 A. No, it was our issue and we dealt with it as
 3 we dealt with other issues. We would have, I
 4 would have liked to have provided this to her
 5 at an earlier point, but it wasn't finalized
 6 until this point on Monday morning.
 7 COFFEY, Q.C.:
 8 Q. If we could, please, exhibit P-1401? I'm
 9 sorry, P-1410, I apologize. This goes on at
 10 some length, this exhibit does, but it's the--
 11 I gather the PowerPoint slide deck, plus
 12 commentary for various people, this one
 13 happens--the first page happens to be for
 14 Oscar.
 15 MS. BONNELL:
 16 A. Uh-hm.
 17 COFFEY, Q.C.:
 18 Q. So the commentary here would have been
 19 prepared by yourself and Leona?
 20 MS. BONNELL:
 21 A. Yes.
 22 COFFEY, Q.C.:
 23 Q. If we could, please, looking at the third
 24 page, in the commentary in the third
 25 paragraph, "However, a major change in

Page 59

1 Q. And you can tell that because, I take it, the
 2 words "not a typical medical error" are
 3 scratched out.
 4 MS. BONNELL:
 5 A. Yeah, this is an earlier version that we're
 6 looking at.
 7 THE COMMISSIONER:
 8 Q. This is an earlier version from a sense of -
 9 MS. BONNELL:
 10 A. It wasn't the final version presented to the
 11 media.
 12 THE COMMISSIONER:
 13 Q. But do you know whether or not the final
 14 version would have changes other than the ones
 15 that are obvious here?
 16 MS. BONNELL:
 17 A. They may very well, is this the only version
 18 of the presentation that you have?
 19 COFFEY, Q.C.:
 20 Q. Well in terms of, there's different versions
 21 of the actual PowerPoint presentation, we have
 22 the final one of that, but the actual--but the
 23 speaking deck, the speaking notes, I
 24 apologize, there aren't a whole lot of copies
 25 of what may or may not be the final versions

Page 58

1 practice has occurred in the last"--I think it
 2 says "several years".
 3 MS. BONNELL:
 4 A. Uh-hm.
 5 COFFEY, Q.C.:
 6 Q. Whose handwriting is that, do you know?
 7 MS. BONNELL:
 8 A. I think it might be Leona's.
 9 COFFEY, Q.C.:
 10 Q. Okay, so this was still a point where it's
 11 being changed and -
 12 MS. BONNELL:
 13 A. Might be just that you have a copy that was a
 14 paper copy from my file.
 15 COFFEY, Q.C.:
 16 Q. Yeah, this happened, the source of this for
 17 the Commission was your own office.
 18 MS. BONNELL:
 19 A. Yes.
 20 COFFEY, Q.C.:
 21 Q. If I could, please, page 10 of the exhibit.
 22 MS. BONNELL:
 23 A. Yes, this is not the final version, this is a
 24 draft version.
 25 COFFEY, Q.C.:

Page 60

1 of those and I don't believe--I stand to be
 2 corrected, but I don't believe we have another
 3 version of that. So the PowerPoint--the
 4 actual presentation as made on December 11th
 5 would have been reflected in what you sent to
 6 Tansy Mundon that morning?
 7 MS. BONNELL:
 8 A. Yes, that's correct.
 9 COFFEY, Q.C.:
 10 Q. That would be the final version.
 11 MS. BONNELL:
 12 A. Yes, yeah.
 13 COFFEY, Q.C.:
 14 Q. Why wouldn't you have sent her the speaking
 15 notes too, the version with the speaking notes
 16 on it? The PowerPoint presentation with the
 17 speaking notes?
 18 MS. BONNELL:
 19 A. I have no idea, Mr. Coffey. The notes were
 20 prepared for Oscar. Oscar didn't really even
 21 use a lot of those notes, by the way, they
 22 were just things that we had prepared for him.
 23 They may not have even been in the final
 24 version of the deck.
 25 COFFEY, Q.C.:

Page 61

1 Q. How did the briefing go, itself?

2 MS. BONNELL:

3 A. Good and bad. The media expressed some

4 concerns to us about what we had sort of

5 outlined for them and we tried to accommodate

6 their needs and make some changes as a result

7 of that.

8 COFFEY, Q.C.:

9 Q. That had to do with what part of this?

10 MS. BONNELL:

11 A. Having to do with the agenda, the way that we

12 had scheduled and our request to--I just

13 didn't think, you know, when we had originally

14 scheduled this, we tried to schedule it for

15 the end of the previous week because I was

16 concerned that, in a sense, we were sort of

17 excluding The Independent from reporting on it

18 in a timely manner by doing it at the

19 beginning of a week. I had hoped to do it

20 sort of at the end of the week, so that The

21 Independent would be able to report on it.

22 And I guess when I learned that Dr. Laing was

23 not going to be available that evening,

24 because she had a clinic to do interviews,

25 which I thought that had been confirmed and it

Page 63

1 Was it Deana Stokes who was there?

2 COFFEY, Q.C.:

3 Q. That would be the Telegram?

4 MS. BONNELL:

5 A. Was it? Okay. I had a feeling it was Barb

6 Fleet who was there, that they didn't--we were

7 trying to make it fair so that everybody could

8 report at the same time, but it was fine with

9 her, so we said if it's fine with you and fine

10 with The Independent, then we'll release

11 everybody to report today.

12 COFFEY, Q.C.:

13 Q. Okay, which would be Monday. Ma'am, did you

14 follow the media coverage afterwards?

15 MS. BONNELL:

16 A. Certainly.

17 COFFEY, Q.C.:

18 Q. And what was the reaction within Eastern

19 Health? What was your reaction first and then

20 your fellow employees?

21 MS. BONNELL:

22 A. We were disappointed that they didn't pick up

23 and report on some of the other information

24 that we had provided them with, but not

25 surprised by the tone of the coverage and not,

Page 62

1 had not, I was concerned that we were giving

2 or we were placing some media at an unfair

3 disadvantage and so we asked them to--

4 initially we asked that they report the

5 following day and actually I remember the

6 Telegram saying, you know, well I don't care

7 if it gets reported today, it doesn't bother

8 me. So we said, well fine, everybody--and we

9 ended up calling media back and saying, go

10 ahead and report today. They were respectful

11 of the embargo, but then we removed that so

12 that they would be able to report on the

13 briefing that afternoon. So there were some

14 concerns like that logistically. They asked

15 for and were given an explanation as to why we

16 were not providing information on causative

17 factors and on total number of changes, and

18 actually the media reported at that time that

19 we wouldn't be able to provide them with the

20 numbers.

21 COFFEY, Q.C.:

22 Q. So Deana Stokes told you what, I'm sorry, in

23 terms of, they didn't care if -

24 MS. BONNELL:

25 A. It wasn't Deana Stokes, I don't think, was it?

Page 64

1 I didn't think that the coverage was

2 particularly unfair, I thought it was fair

3 coverage.

4 COFFEY, Q.C.:

5 Q. What things were you disappointed they did not

6 cover?

7 MS. BONNELL:

8 A. We had hoped that providing them with

9 information on the test, on the--more

10 background information on the challenges of

11 the test and on ER/PR and the impact of

12 aromatase inhibitors would be covered more, but

13 we knew that the media had that information

14 anyway, so at least they had it, which, you

15 know, you talk about anticipating a briefing

16 all this period of time, I don't think I ever

17 anticipated finding myself in December of

18 2006, I didn't anticipate that we were leading

19 up to a media briefing of that nature. But--

20 because I would hoped that this information

21 should have--or I think I felt that a lot of

22 this information could have been provided at

23 earlier points along the way. So we found

24 ourselves in a situation where the pressure

25 from the public was so great to hear

Page 65

1 something, that we pressed the organization to
 2 do this form of briefing for the media,
 3 despite the class action lawsuit and the
 4 limitations that that put on us.
 5 COFFEY, Q.C.:
 6 Q. Looking back on it, I take it the media did
 7 ask what caused this or what the cause or
 8 causes were?
 9 MS. BONNELL:
 10 A. Yes, there were some talk of that, yes. I
 11 don't remember them asking it repeatedly
 12 because it was pretty well stated up front
 13 that we weren't going to talk about it.
 14 COFFEY, Q.C.:
 15 Q. And did you understand in the media reporting
 16 afterward, did you have any sense that this
 17 matter had been finally or conclusively dealt
 18 with from the media's perspective?
 19 MS. BONNELL:
 20 A. No.
 21 COFFEY, Q.C.:
 22 Q. What did you anticipate based upon a media
 23 coverage in the aftermath of the press
 24 conference would happen?
 25 MS. BONNELL:

Page 67

1 about the media briefing?
 2 MS. BONNELL:
 3 A. No, not that I recall.
 4 COFFEY, Q.C.:
 5 Q. Was the Department aware that certain
 6 information was not going to be given out,
 7 such as the causative factors and the number
 8 of conversions?
 9 MS. BONNELL:
 10 A. I think we had talked about the impact of the
 11 class action lawsuit when we met with the
 12 Minister on the 23rd.
 13 COFFEY, Q.C.:
 14 Q. Yes.
 15 MS. BONNELL:
 16 A. The numbers, well, they received all the
 17 information on the 9th, but I don't recall us
 18 ever talking about numbers prior to that, in
 19 terms of what we were going to release to the
 20 media.
 21 COFFEY, Q.C.:
 22 Q. I'm sorry, on the 9th you say?
 23 MS. BONNELL:
 24 A. I'm sorry, on the -
 25 COFFEY, Q.C.:

Page 66

1 A. Continuing media coverage, continuing
 2 exploration of the issue, but we were also,
 3 you know, aware that a lawsuit was pending as
 4 well, so that there would be more information
 5 revealed through that process.
 6 COFFEY, Q.C.:
 7 Q. Exhibit P-196 please? And this is an e-mail
 8 of December 11th, 2006 at 9:50 a.m. from Tansy
 9 Mundon to yourself. I apologize, that's not
 10 the--just acknowledging--I'm sorry, page four,
 11 please, yes, at 11:11 a.m. that morning from
 12 Tansy to both yourself and Leona Barrington.
 13 She says "can one of you please give me a call
 14 following the briefings on ER/PR so we can
 15 update the Minister before the House of
 16 Assembly opens this afternoon. Thanks,
 17 Tansy." Did that phone call occur?
 18 MS. BONNELL:
 19 A. I'm trying to remember if I made it or not. I
 20 don't believe I made it, but I believe Ms.
 21 Barrington did make that call.
 22 COFFEY, Q.C.:
 23 Q. And that day and in the days afterward and
 24 weeks afterward, was there any communication
 25 between Eastern Health and the Department

Page 68

1 Q. They received all the numbers back on November
 2 23rd.
 3 MS. BONNELL:
 4 A. They did, yes.
 5 COFFEY, Q.C.:
 6 Q. Yes.
 7 MS. BONNELL:
 8 A. And then the briefing material was provided to
 9 Ms. Mundon for the Department on the 11th, so
 10 they were aware of what we had presented
 11 certainly.
 12 COFFEY, Q.C.:
 13 Q. Explicitly, in the Q and A's anyway, said
 14 we're not going to be talking about rate of
 15 error.
 16 MS. BONNELL:
 17 A. That's right.
 18 COFFEY, Q.C.:
 19 Q. Or causative factors.
 20 MS. BONNELL:
 21 A. That's right.
 22 COFFEY, Q.C.:
 23 Q. And I appreciate that if they, you know,
 24 opened them and read them, opened the
 25 documents and actually read them, that they

Page 69

1 would have been aware of that. I'm asking you
 2 beyond whether or not they actually chose to
 3 read it, do you recall whether or not they
 4 were communicated with otherwise, like
 5 verbally?
 6 MS. BONNELL:
 7 A. On the numbers, the issue of the numbers?
 8 COFFEY, Q.C.:
 9 Q. Yes, the fact that we're not going to give out
 10 the numbers and -
 11 MS. BONNELL:
 12 A. I certainly didn't communicate that.
 13 COFFEY, Q.C.:
 14 Q. I take it you expected that they'd actually
 15 read the material you sent them?
 16 MS. BONNELL:
 17 A. Yes.
 18 COFFEY, Q.C.:
 19 Q. So the press conference is over. Was there
 20 any kind of--what's the word I'm looking for--
 21 wrap up afterward, discussion within Eastern
 22 Health as to how it went and where we go from
 23 here?
 24 MS. BONNELL:
 25 A. No.

Page 71

1 MS. BONNELL:
 2 A. Yes.
 3 COFFEY, Q.C.:
 4 Q. Did you take it up with anybody?
 5 MS. BONNELL:
 6 A. No. There was certainly a lot of discussion
 7 about the impact that the class action lawsuit
 8 was having on our ability to talk about the
 9 issue.
 10 COFFEY, Q.C.:
 11 Q. Anybody ever speak about why that was so? If
 12 the cause is the cause is the cause, well,
 13 then it is the cause.
 14 MS. BONNELL:
 15 A. Um-hm.
 16 COFFEY, Q.C.:
 17 Q. So did anybody ever--did you ever discuss--and
 18 leaving aside Mr. Boone or Ms. Bussey, because
 19 I don't want to hear anything that they may or
 20 may not have said, but leaving them aside, or
 21 people talking about the legal advice, was
 22 there ever any explanation that you can recall
 23 as to why, if we know what the cause or causes
 24 are, we can't just simply tell people?
 25 MS. BONNELL:

Page 70

1 COFFEY, Q.C.:
 2 Q. So it ended, you would have monitored the
 3 media coverage in the immediate aftermath of
 4 it?
 5 MS. BONNELL:
 6 A. Yes.
 7 COFFEY, Q.C.:
 8 Q. Where it was still being talked about?
 9 MS. BONNELL:
 10 A. Yes.
 11 COFFEY, Q.C.:
 12 Q. Were you aware that at least in the media
 13 publicly, some people were expressing
 14 unhappiness about the fact that the causes
 15 were still not being talked about -
 16 MS. BONNELL:
 17 A. Yes.
 18 COFFEY, Q.C.:
 19 Q. - and the total numbers of conversions were
 20 still not being talked about, you were aware
 21 of -
 22 MS. BONNELL:
 23 A. Oh yes.
 24 COFFEY, Q.C.:
 25 Q. - of the unhappiness?

Page 72

1 A. I think that, you know, sometimes as a
 2 communications person, you find yourself--and
 3 I can only speak from my own perspective--
 4 fighting against an unwillingness to want to
 5 talk about things that are before the Courts.
 6 COFFEY, Q.C.:
 7 Q. Okay.
 8 MS. BONNELL:
 9 A. And I think that the one thing that's been
 10 learned in this process is that we have to
 11 find a way, with an issue this large and with
 12 an issue that's anticipated to go on for a
 13 great length of time, to try and strike a
 14 better balance between allowing the Courts to
 15 handle the legal matters and still being able
 16 to maintain effective relationships with your
 17 stakeholders. It's a traditional view of
 18 communications that you just don't speak--
 19 sometimes in certain settings, it's accepted
 20 and then in other times, it's not, and in this
 21 particular one, it was certainly not accepted.
 22 I think the issue -
 23 COFFEY, Q.C.:
 24 Q. Accepted by the public -
 25 MS. BONNELL:

Page 73

1 A. The public.
 2 COFFEY, Q.C.:
 3 Q. - and the media?
 4 MS. BONNELL:
 5 A. Yeah, and I think that organizations that have
 6 to confront issues like this have to find a
 7 better way of negotiating that balance in a
 8 more balanced way. I mean, we really came
 9 down heavily on the side of nothing, you know,
 10 as opposed to striking a better balance.
 11 COFFEY, Q.C.:
 12 Q. Ma'am, with respect to this matter, just so
 13 I'm clear, the December 11th press conference
 14 had come and gone and from your perspective,
 15 as far as you knew, bearing in mind the
 16 position you were in within Eastern Health,
 17 the cause or causes of the problem resided in
 18 the external review reports, from your
 19 perspective, if they resided anywhere.
 20 MS. BONNELL:
 21 A. No, I didn't think that.
 22 COFFEY, Q.C.:
 23 Q. You didn't think that?
 24 MS. BONNELL:
 25 A. No.

Page 75

1 Banerjee's report?
 2 MS. BONNELL:
 3 A. Yes.
 4 COFFEY, Q.C.:
 5 Q. The October 17 one.
 6 MS. BONNELL:
 7 A. Yes.
 8 COFFEY, Q.C.:
 9 Q. Was it every as plainly put to you as he
 10 listed it under reasons for test failure? Did
 11 Dr. Denic ever, kind of, list them all; we
 12 have a problem with fixation; we have a
 13 problem with we didn't use internal controls;
 14 we have a problem that we used internal
 15 controls and they didn't stain, that sort of--
 16 was it ever spelled -
 17 MS. BONNELL:
 18 A. I was aware of all of those issues. I'm not a
 19 technical person and I feel I'm outside of my
 20 scope to be commenting on -
 21 COFFEY, Q.C.:
 22 Q. What I'm asking you is was it ever
 23 communicated to you, kind of, that plainly and
 24 bluntly?
 25 MS. BONNELL:

Page 74

1 COFFEY, Q.C.:
 2 Q. Okay. You thought other people knew what the
 3 cause or causes were outside the external
 4 review reports.
 5 MS. BONNELL:
 6 A. No, I thought that the external--my belief of
 7 the external review reports was that they
 8 provided insight into the causative factors,
 9 that they indicated improvements that could be
 10 made in the laboratory to ensure that our
 11 processes were better. And that--I really
 12 believe, sir, that, you know, there wasn't,
 13 you know, I couldn't say to Dr. Denic--because
 14 I did say to Dr. Denic and others, you know,
 15 what happened? What went wrong? And those
 16 answers couldn't be provided to me in a simple
 17 way, that there were complicating factors,
 18 that it was complex, that there was more than
 19 one issue. That's my understanding.
 20 COFFEY, Q.C.:
 21 Q. Oh, that's what you were being told?
 22 MS. BONNELL:
 23 A. Yes.
 24 COFFEY, Q.C.:
 25 Q. Okay. You have since read, for example, Dr.

Page 76

1 A. The first time that I had a good
 2 understanding, better understanding because it
 3 still is not good, of everything was at the
 4 briefing that was held for the doctors in late
 5 November. And that was the first time that I
 6 was aware of the impact on improvements in
 7 antigens, importance of fixation. All of
 8 these things had been referenced before, but
 9 nobody ever sat me down and I didn't ask in a
 10 such a direct way as you're asking. In some
 11 ways, I wish that, you know, one of the things
 12 that we had done in this circumstances is that
 13 we had identified an individual from a
 14 communications perspective, either an external
 15 person or an internal person who could focus
 16 their energies on this topic. My energies
 17 were never focused on this alone. There were
 18 a multitude of other things that I was dealing
 19 with at the same time as this and I know this
 20 issue is importance, but there were others as
 21 well.
 22 COFFEY, Q.C.:
 23 Q. So, Ma'am, from the perspective then, I take
 24 it, as December of '06 ends, the reasons for
 25 test failure, as they were, or for the

Page 77

1 problems, if they were ever to become known to
 2 the public, we're going to have to come out in
 3 the course of a lawsuit, if they were ever
 4 going to come out.
 5 MS. BONNELL:
 6 A. They would come out in that process, that was
 7 my understanding, that they would come out in
 8 that process.
 9 COFFEY, Q.C.:
 10 Q. And if the Plaintiffs were not able to
 11 accomplish that -
 12 MS. BONNELL:
 13 A. I don't think I went that far in my head. I
 14 assumed that all would be revealed in that
 15 process.
 16 COFFEY, Q.C.:
 17 Q. All would be revealed, but you understood the
 18 external reviews would not be revealed?
 19 MS. BONNELL:
 20 A. Themselves, no, because I believe they were to
 21 be covered by the--protected by the Evidence
 22 Act.
 23 COFFEY, Q.C.:
 24 Q. Exhibit P-0032 please, actually, P-0432 and
 25 exhibit, as well, P-0431, first of all, I

Page 79

1 A. Um-hm.
 2 COFFEY, Q.C.:
 3 Q. "We are surprised by this information as our
 4 understanding is that individuals impacted by
 5 the review had been contacted. The process in
 6 notifying individuals patients has involved
 7 numerous individuals, physicians and
 8 specialists both within and outside the
 9 organizations. Eastern Health is now
 10 rechecking the list to verify with the
 11 physicians and specialists involved that these
 12 patients have all been contacted. And we
 13 encourage any individuals who were in the
 14 retesting group and have not heard from their
 15 physician or from Eastern Health, to contact
 16 the client service" at a particular number.
 17 So, Ma'am, what was this about at the end of
 18 January of '07?
 19 MS. BONNELL:
 20 A. There is an earlier e-mail to this, I think,
 21 is there not, from Stephanie? I think she had
 22 a story that she was following up on on an
 23 individual who said that they weren't
 24 notified.
 25 COFFEY, Q.C.:

Page 78

1 apologize, P-0431, page two of it. This is a
 2 note Mr. Tilley had made of January 25, 2007 a
 3 conversation he had with yourself apparently.
 4 "The Independent", patient missed and if we
 5 could go back to Exhibit P-0432. This is an
 6 e-mail of January 25, 2007, 12:35 p.m. from
 7 yourself to Dr. Howell, Ms. Predham, George
 8 Tilley and Leona Barrington. The subject is
 9 key messages, "the importance is high, the
 10 flag status is red". What does that mean? I
 11 take it, was there some way of emphasizing -
 12 MS. BONNELL:
 13 A. No, I don't use flags. I'm not sure why
 14 that's where unless the message that came to
 15 me from Leona was flagged originally because I
 16 don't generally use them.
 17 COFFEY, Q.C.:
 18 Q. And you've written, "I've spoken with George
 19 and he's good with the following messages and
 20 Leona has spoken to Stephanie, she apologized
 21 for the short notice, we can only extend her
 22 deadline to 2 p.m." And the message, I take
 23 it, is at the bottom, "we can provide the
 24 following short statements".
 25 MS. BONNELL:

Page 80

1 Q. Yes.
 2 MS. BONNELL:
 3 A. And -
 4 COFFEY, Q.C.:
 5 Q. So, this is the response, I take it, that
 6 George Tilley was happy to go with or prepared
 7 to go with.
 8 MS. BONNELL:
 9 A. Yes.
 10 COFFEY, Q.C.:
 11 Q. The comment.
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. Within the organization, what, if anything,
 16 happened? You're being told now at the end of
 17 January, you missed somebody and in December
 18 you told the public that everybody had been
 19 contacted.
 20 MS. BONNELL:
 21 A. Yes. I wasn't sure--do we have that original
 22 e-mail.
 23 COFFEY, Q.C.:
 24 Q. I don't have it here in front of me. I'm sure
 25 it's there.

Page 81

1 MR. SIMMONS:
 2 Q. 1207.
 3 COFFEY, Q.C.:
 4 Q. 1207? Thank you.
 5 MR. SIMMONS:
 6 Q. The second page.
 7 COFFEY, Q.C.:
 8 Q. Thank you.
 9 MS. BONNELL:
 10 A. Sorry, I just don't remember the -
 11 COFFEY, Q.C.:
 12 Q. The story is about a woman involved in the
 13 ER/PR testing who just found out about her
 14 results. She had a reversal and was advised
 15 to start taking Tamoxifen two weeks ago, but
 16 according to the doctor she spoke with her
 17 test results actually arrived back in St.
 18 John's in 2006. She hasn't been given an
 19 explanation for the delay. Questions, are
 20 there other patients have yet to be tracked
 21 down? Is there a check list of some sort to
 22 make sure everyone is being reached? I'm
 23 wondering if this is an isolated case, I
 24 guess. Thanks, Leona. Hope you can help us
 25 out this morning".

Page 83

1 individual was raised, they were concerned
 2 that perhaps some of those physicians had
 3 indicated they had followed up, may not have
 4 followed up. That's what we were thinking at
 5 that point in time, for sure.
 6 COFFEY, Q.C.:
 7 Q. What did you do about it, as an organization?
 8 MS. BONNELL:
 9 A. I didn't do anything about it. It would have
 10 been followed up by quality.
 11 COFFEY, Q.C.:
 12 Q. Did you communicate the fact that this had
 13 happened to the Department of Health?
 14 MS. BONNELL:
 15 A. I didn't, myself, no, I don't think so, unless
 16 there's an e-mail to that effect that.
 17 COFFEY, Q.C.:
 18 Q. And at the time would it have been important
 19 for the Department of Health, do you think, to
 20 know? That Eastern Health is now uncertain -
 21 MS. BONNELL:
 22 A. That's not the kind of message I would
 23 naturally communicate to Ms. Mundon anyway.
 24 What I might communicate to Ms. Mundon is
 25 there's a story going to appear in "The

Page 82

1 MS. BONNELL:
 2 A. Right. I remember this now. You'd be better
 3 speaking to somebody in quality about this,
 4 but my understanding of the contact was that
 5 if a patient's test result had not changed,
 6 then they would have been contacted by an
 7 employee in the quality department.
 8 COFFEY, Q.C.:
 9 Q. Um-hm.
 10 MS. BONNELL:
 11 A. But patients whose test results did change for
 12 the panel was offering a recommended
 13 treatment, was suggesting a recommended
 14 treatment change. Then that information was
 15 communicated by the most responsible physician
 16 for the patient. So, that could be, in fact,
 17 one of our cancer physicians who works for
 18 Eastern Health or a surgeon who works for
 19 Eastern Health or some other Eastern Health
 20 physician or it may be a family physician as
 21 well. So, I guess at this point we were
 22 wondering if--even though we'd made our--my
 23 understanding was that the quality department
 24 had followed with physician to ensure that
 25 patients had been contacted, but when this

Page 84

1 Independent"--if I didn't, I don't know why
 2 Leona and I didn't do that, but that sort of
 3 concern would have been handled at a different
 4 level from me. But it wouldn't be unusual for
 5 us to notify Tansy of a story that was coming.
 6 Now, if we didn't, I'm not sure why we didn't
 7 in this case.
 8 COFFEY, Q.C.:
 9 Q. And an explanation for the incident or the
 10 circumstances referenced in a story, you
 11 wouldn't let them know about that though
 12 routinely?
 13 MS. BONNELL:
 14 A. No, not routinely, no.
 15 COFFEY, Q.C.:
 16 Q. Okay.
 17 MS. BONNELL:
 18 A. I think at this point we were focused on, was
 19 there a problem with the notifications that we
 20 had to address.
 21 COFFEY, Q.C.:
 22 Q. Well, what if anything--do you know what the
 23 organization did to follow up on that? What
 24 were you told?
 25 MS. BONNELL:

Page 85

1 A. I was told that they were going to verify with
 2 the physicians.
 3 COFFEY, Q.C.:
 4 Q. If we could, please, Exhibit P-0202. Do you
 5 recall being told that they had done so?
 6 MS. BONNELL:
 7 A. Yes, I believe so, yes.
 8 COFFEY, Q.C.:
 9 Q. And by what point in time had that occurred?
 10 Before May of '07?
 11 MS. BONNELL:
 12 A. Yes, before May of '07, yes.
 13 COFFEY, Q.C.:
 14 Q. This is an e-mail from Tansy Mundon to a
 15 number of people in the Department of Health,
 16 Thursday, March 15, 2007, 10:35 p.m. She
 17 says, "for your information, Susan Bonnell
 18 told me this afternoon that Eastern Health
 19 received a submission under the Access to
 20 Information from the media requesting patient
 21 conversations rates"--should be conversion
 22 rates--"associated with ER/PR. Apparently
 23 Susan was only informed about the request
 24 today. But the request has to be completed by
 25 early next week. It appears that the media

Page 87

1 COFFEY, Q.C.:
 2 Q. Why did you contact Tansy Mundon about it?
 3 MS. BONNELL:
 4 A. I don't remember if I was asked to do that or
 5 if I just did it in conversation with Tansy,
 6 told her that there was a request.
 7 COFFEY, Q.C.:
 8 Q. And what was the purpose in letting the
 9 department know?
 10 MS. BONNELL:
 11 A. Just to advise her that, you know, when
 12 there's a freedom of information request on
 13 something that there's another story coming.
 14 So, this is what I mean when I say quite
 15 often, I would have informed her of upcoming
 16 stories on an issue.
 17 COFFEY, Q.C.:
 18 Q. Now, ma'am, there is--what then, if anything,
 19 do you recall about ER/PR before the middle of
 20 May 2007, anything else happen? We're into
 21 March now, February, March, April.
 22 MS. BONNELL:
 23 A. Not from a communications perspective, there
 24 was nothing. I knew that they were preparing
 25 for the class action to be certified and we

Page 86

1 will receive limited information. Once Susan
 2 receives further details expected tomorrow,
 3 she will advise me accordingly". So, Ma'am, I
 4 take it that this was Mr. Quinn's request for
 5 information, depersonalized I suppose or de-
 6 identified.
 7 MS. BONNELL:
 8 A. Yes.
 9 COFFEY, Q.C.:
 10 Q. In relation to conversions?
 11 MS. BONNELL:
 12 A. Right.
 13 COFFEY, Q.C.:
 14 Q. And this is the one that ended up before the
 15 Privacy Commissioner, having to make a ruling
 16 on eventually.
 17 MS. BONNELL:
 18 A. Yes, I believe so, yes.
 19 COFFEY, Q.C.:
 20 Q. What involvement, if any, did you have in
 21 responding to it?
 22 MS. BONNELL:
 23 A. Very limited. I wasn't informed of it until
 24 they were pretty far along in the preparation
 25 for it.

Page 88

1 expected that there would be another volley of
 2 media around that time and there were some
 3 occasional stories leading up to that.
 4 COFFEY, Q.C.:
 5 Q. And what, if any, preparation or activities
 6 did you participate in to deal with stories?
 7 MS. BONNELL:
 8 A. Well, it was pretty much determined that we
 9 weren't going to be participating in stories
 10 on the class action lawsuit, that we weren't
 11 going to speak to it. And so, there were no
 12 preparations.
 13 COFFEY, Q.C.:
 14 Q. And so who had made that determination and
 15 when?
 16 MS. BONNELL:
 17 A. I certainly believed that Mr. Tilley was of
 18 the opinion that as this matter went before
 19 the courts and once it was before the courts
 20 that we were not going to be speaking to it.
 21 And the occasional times that we did speak to
 22 it were times when we had to argue the case to
 23 speak to it. There was a reticence to speak
 24 to ER/PR and it was because it was before the
 25 courts. That's the opinion that was given to

Page 89

1 me.
 2 COFFEY, Q.C.:
 3 Q. That was by Mr. Tilley?
 4 MS. BONNELL:
 5 A. Yes.
 6 COFFEY, Q.C.:
 7 Q. And did that start early on?
 8 MS. BONNELL:
 9 A. Yes.
 10 COFFEY, Q.C.:
 11 Q. And continued, I take it, well into May.
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. How did you first find out then about the fact
 16 that the media were, in May of '07, going to
 17 report on this again.
 18 MS. BONNELL:
 19 A. I had two phone calls from reporters. The
 20 first one was from Mr. Quinn, and the second
 21 one was from Heather Barrett, who was
 22 producing for The Current, I believe. And
 23 when Mr. Quinn called, I was a little bit
 24 confused actually by his request because I was
 25 not aware of the fact that in responding to

Page 91

1 A. So I didn't know--I figured he had gotten that
 2 affidavit on his own, that he'd--I didn't
 3 realize we had directed him to the affidavit.
 4 COFFEY, Q.C.:
 5 Q. That Eastern Health had actually pointed him
 6 to it?
 7 MS. BONNELL:
 8 A. Yes. So when he called asking about numbers -
 9 COFFEY, Q.C.:
 10 Q. Just before we leave that -
 11 MS. BONNELL:
 12 A. Okay.
 13 COFFEY, Q.C.:
 14 Q. - you first found out that when?
 15 MS. BONNELL:
 16 A. Much, much later.
 17 COFFEY, Q.C.:
 18 Q. How later?
 19 MS. BONNELL:
 20 A. This year sometime.
 21 COFFEY, Q.C.:
 22 Q. In 2008?
 23 MS. BONNELL:
 24 A. Yeah.
 25 COFFEY, Q.C.:

Page 90

1 his request he'd been given the case file
 2 docket number.
 3 COFFEY, Q.C.:
 4 Q. In responding to his -
 5 MS. BONNELL:
 6 A. This one.
 7 COFFEY, Q.C.:
 8 Q. - access to information request?
 9 MS. BONNELL:
 10 A. Right, that he'd been told that we had to go
 11 to the privacy commissioner to see if this
 12 information was, in fact, de-identifiable,
 13 which is not a word, and that in responding to
 14 it, they said, "well, you know, if you're
 15 looking for numbers, there's an affidavit
 16 filed in Court" and they gave him the case
 17 number. So I was not aware of that.
 18 COFFEY, Q.C.:
 19 Q. When did you first become aware of that? When
 20 he phoned you?
 21 MS. BONNELL:
 22 A. Not until much later, no.
 23 COFFEY, Q.C.:
 24 Q. It wasn't even--okay. So he calls and -
 25 MS. BONNELL:

Page 92

1 Q. Okay. I'm sorry, go ahead.
 2 MS. BONNELL:
 3 A. The call was about confusion in the numbers.
 4 He was calling me about numbers. I don't
 5 remember if you've got the actual log there.
 6 It might help. But I didn't know what numbers
 7 he was referring to because as far as I knew,
 8 there was only so many numbers out there, and
 9 then we talked about the affidavit and then I
 10 asked--then I realized that he was referring
 11 to the affidavit, because I had in fact seen
 12 the affidavit before that point.
 13 COFFEY, Q.C.:
 14 Q. Had you seen it before it was filed or around
 15 the time it was filed?
 16 MS. BONNELL:
 17 A. It was sent to me after it was filed, but not
 18 -
 19 COFFEY, Q.C.:
 20 Q. Do you recall when it was filed?
 21 MS. BONNELL:
 22 A. No, early in January it was filed, I believe,
 23 but I didn't see it until a little bit later
 24 than that, maybe a month or more later, and -
 25 COFFEY, Q.C.:

Page 93

1 Q. Having seen it, while we're on the topic -
 2 MS. BONNELL:
 3 A. Yes.
 4 COFFEY, Q.C.:
 5 Q. - you saw the numbers in it?
 6 MS. BONNELL:
 7 A. Yes.
 8 COFFEY, Q.C.:
 9 Q. The same numbers that back in December you'd
 10 refused to give out.
 11 MS. BONNELL:
 12 A. That we weren't allowed to talk about, yes.
 13 COFFEY, Q.C.:
 14 Q. Did that cause you to do anything?
 15 MS. BONNELL:
 16 A. No.
 17 COFFEY, Q.C.:
 18 Q. You would have realized that it was a public
 19 document?
 20 MS. BONNELL:
 21 A. Yes. I'm not sure if I understood entirely
 22 how accessible affidavits are. So I'm not
 23 sure that I was aware that anybody could go
 24 down to the Court and look at it. I'm not
 25 sure if I was aware of that. Again, I was

Page 95

1 A. No, not -
 2 COFFEY, Q.C.:
 3 Q. - "we hear you, Susan, but we're not going to
 4 do that."
 5 MS. BONNELL:
 6 A. Right. Suggested that I direct him to Mr.
 7 Boone, direct Mr. Quinn to Mr. Boone, which I
 8 believe I did, and that we wouldn't be
 9 speaking to it.
 10 COFFEY, Q.C.:
 11 Q. So that's one call. How about The Current?
 12 MS. BONNELL:
 13 A. I told her the same thing when she called me.
 14 She actually--I was supposed to be actually on
 15 leave, first little bit of leave in about a
 16 year and a half, I think, and I didn't get it
 17 that week, but I was home that day and she
 18 called me at home, or I was speaking to her
 19 from my home, and told her the same thing,
 20 that we wouldn't be speaking to it, and I
 21 think I also called Ms. Mundon to let her know
 22 that this was going to break in the media on
 23 Monday.
 24 COFFEY, Q.C.:
 25 Q. On Monday the -

Page 94

1 thinking once it goes before the Courts, it'll
 2 be part of that.
 3 COFFEY, Q.C.:
 4 Q. So you hadn't taken it up with anybody when
 5 you actually seen the -
 6 MS. BONNELL:
 7 A. No.
 8 COFFEY, Q.C.:
 9 Q. - the affidavit with the numbers?
 10 MS. BONNELL:
 11 A. No.
 12 COFFEY, Q.C.:
 13 Q. Okay, Mr. Quinn, you were telling me is
 14 talking about confusion.
 15 MS. BONNELL:
 16 A. We have a little confusion at first over what
 17 it is that he wants. That gets clarified. I
 18 realize it's the affidavit. I recall going
 19 upstairs, pulling Mr. Tilley and Dr. Howell
 20 out of a meeting, informing them of the
 21 request, indicating that we should speak to it
 22 and being told that we would not.
 23 COFFEY, Q.C.:
 24 Q. So Mr. Tilley and Dr. Howell tell you -
 25 MS. BONNELL:

Page 96

1 MS. BONNELL:
 2 A. I think it was actually a Tuesday that the
 3 story broke.
 4 COFFEY, Q.C.:
 5 Q. Tuesday. You had called Ms. Mundon when in
 6 this chain of events? After Mr. Quinn had
 7 spoken with you or after -
 8 MS. BONNELL:
 9 A. No, I think it was after the Heather Barrett
 10 call, yeah.
 11 COFFEY, Q.C.:
 12 Q. And what, if any, was her reaction?
 13 MS. BONNELL:
 14 A. Thanks for the call.
 15 COFFEY, Q.C.:
 16 Q. And did you explain to her that you weren't
 17 going to comment?
 18 MS. BONNELL:
 19 A. Yes.
 20 COFFEY, Q.C.:
 21 Q. So the Department knew that Eastern Health's
 22 position was "we will not be commenting upon
 23 the story"?
 24 MS. BONNELL:
 25 A. That's correct.

Page 97

1 COFFEY, Q.C.:

2 Q. So on May 15th then, what happens?

3 MS. BONNELL:

4 A. Well, the story broke and it was--I don't know

5 if you have the story and you want to look at

6 it, but I knew when I saw the story that it

7 wasn't going to be good, that the week would

8 not be good and that nothing was good at that

9 point. It was very defeating.

10 COFFEY, Q.C.:

11 Q. When you contacted Ms. Mundon, at that point,

12 did you understand what the media's approach

13 was going to be, when you had spoken to Ms.

14 Mundon? The approach that you saw reflected

15 on May 15th?

16 MS. BONNELL:

17 A. I knew that they were going to talk about the

18 numbers, and I suspected that what would come

19 from that was that they would calculate their

20 own rate of error for the test, which they

21 wanted us to provide for them in December. I

22 anticipated that much.

23 COFFEY, Q.C.:

24 Q. Did you tell that to Ms. Mundon?

25 MS. BONNELL:

Page 99

1 COFFEY, Q.C.:

2 Q. You had sent her the numbers back in--well,

3 you knew the Minister had the numbers on

4 November 23rd?

5 MS. BONNELL:

6 A. Um-hm.

7 COFFEY, Q.C.:

8 Q. You had told her December 11th in the

9 materials that you sent her that we weren't

10 going to speak about a number of numbers.

11 MS. BONNELL:

12 A. It was certainly reported in the media that we

13 didn't speak about any numbers, but that now

14 the numbers would be part of the story.

15 COFFEY, Q.C.:

16 Q. Did she ask you to do anything?

17 MS. BONNELL:

18 A. I don't recall her asking me specifically to

19 do anything at that point. My focus was not

20 on Ms. Mundon. It was elsewhere at that

21 point.

22 COFFEY, Q.C.:

23 Q. So on the 15th when this story--you first read

24 the story, what did you--how did you see it,

25 from your perspective, unfolding then? What

Page 98

1 A. No, I don't recall specifically saying that to

2 Ms. Mundon.

3 COFFEY, Q.C.:

4 Q. Do you recall then what it was you told Ms.

5 Mundon?

6 MS. BONNELL:

7 A. I told her that there was going--that CBC had

8 an affidavit, that all the numbers were in the

9 affidavit, and that there would be a story

10 following about the numbers.

11 COFFEY, Q.C.:

12 Q. And did she ask for a copy of the affidavit?

13 MS. BONNELL:

14 A. Not at that point. It was a very--I just

15 remember either by e-mail or phone, having a

16 very quick communicate with her. I think it was

17 a phone call, but whatever it was, it was very

18 brief.

19 COFFEY, Q.C.:

20 Q. So in terms of this matter in communicating

21 with Ms. Mundon, was there any sense of--from

22 her end, "well, what's this about? What about

23 the numbers?"

24 MS. BONNELL:

25 A. No.

Page 100

1 did you anticipate was going to happen?

2 MS. BONNELL:

3 A. I didn't think it would unfold as poorly as it

4 did, but I knew it was a negative story, and I

5 knew that there were errors in the story that

6 I would like to have corrected, but that day,

7 we weren't entering into that story. I turned

8 down--I spent two days turning down media

9 requests.

10 COFFEY, Q.C.:

11 Q. That would be the 15th and 16th, Tuesday and

12 Wednesday.

13 MS. BONNELL:

14 A. Um-hm.

15 COFFEY, Q.C.:

16 Q. Other than turning down media requests, what,

17 if anything, did you do?

18 MS. BONNELL:

19 A. Watched the media coverage, tried to inform my

20 executive of what was happening with the media

21 coverage, how things were going terribly wrong

22 at that point, that I was very concerned

23 because of the impression that was being left

24 with the public about how everybody else was

25 interpreting those numbers and the only person

Page 101

1 who really had--the only organization that
 2 really was in a position to do that was
 3 refusing to speak to it. It was very
 4 frustrating.

5 COFFEY, Q.C.:

6 Q. And if we could, please, Exhibit P-0106? Now
 7 this is several pages long. It's a media
 8 coverage story from CBC News, but on May 15th
 9 2007, 3:56 p.m., Mr. Tilley sent an e-mail, I
 10 gather, to the Board and copied it to the
 11 executive team, Eastern Health May 2005. Were
 12 you included in that executive team, Eastern
 13 Health May 2005 category?

14 MS. BONNELL:

15 A. Yes, I did receive those e-mails.

16 COFFEY, Q.C.:

17 Q. And the subject is ER/PR testing, media
 18 coverage, and he has written a letter to--or a
 19 note to the trustees, and did you assist him
 20 in drafting this?

21 MS. BONNELL:

22 A. No.

23 COFFEY, Q.C.:

24 Q. Do you know who--do you know if anybody did?

25 MS. BONNELL:

Page 103

1 "I was confronted today with the story and
 2 questions from colleagues. I heard the
 3 comments of the Minister during the supper
 4 hour CBC report. He must say more than that
 5 Eastern Health was advised by its lawyers to
 6 not disclose information. That sounds very
 7 bad and makes it appear that we did
 8 deliberately mislead. We must respond, in my
 9 view, to the allegations that we misled the
 10 media and the public in our previous
 11 disclosures. I think we can do so without
 12 prejudicing the legal case for the defence."
 13 Signed Bill.

14 Now your understanding, when you got this
 15 e-mail exchange, because it is forwarded to
 16 you later on in the process, that Mr. Boyd was
 17 a lawyer? Did you understand -

18 MS. BONNELL:

19 A. No, I didn't.

20 COFFEY, Q.C.:

21 Q. Did you understand that Mr. Boyd was a lawyer?

22 MS. BONNELL:

23 A. No, I didn't know he was a lawyer, no.

24 COFFEY, Q.C.:

25 Q. Okay. So you wouldn't have read it in that

Page 102

1 A. I don't believe, unless he asked me for that
 2 information that follows from the--he may have
 3 asked me for that, but I didn't assist him in
 4 writing it.

5 COFFEY, Q.C.:

6 Q. Now it ends with a reference to "as you would
 7 have expected, on the advice of our legal
 8 counsel, we are staying away from any public
 9 debate as this issue proceeds through the
 10 Court process." I take it that summarizes
 11 Eastern Health's position at the time.

12 MS. BONNELL:

13 A. Certainly.

14 COFFEY, Q.C.:

15 Q. Do you know if the Board had known that this
 16 was going to break or been told?

17 MS. BONNELL:

18 A. I certainly wasn't involved in informing them,
 19 but I never did have direct contact with the
 20 Board like that anyway.

21 COFFEY, Q.C.:

22 Q. Now this is a series of e-mails then that
 23 continue, but embedded in them is one from
 24 Bill Boyd of May 15th 2007, 8:56 p.m. to Mr.
 25 Tilley, and he thanks Mr. Tilley and he says

Page 104

1 context?

2 MS. BONNELL:

3 A. No.

4 COFFEY, Q.C.:

5 Q. His comment that "that sounds very bad and
 6 makes it appear that we did deliberately
 7 mislead," did you concur with his assessment?

8 MS. BONNELL:

9 A. Yes, I did.

10 COFFEY, Q.C.:

11 Q. When I come up above here, actually Mr. Tilley
 12 does, at 7:53 on the 16th, send this--forward
 13 Mr. Boyd's comments, "opinion of Board member,
 14 Bill Boyd, lawyer." So he had actually in
 15 passing pointed that out to you. And then Ms.
 16 Predham sends an e-mail at 8:49 a.m. that
 17 morning expressing a certain view in the first
 18 paragraph. In the second view, "the second
 19 part of me--the other part of me is thinking
 20 we're only going to give them more fodder and
 21 that whatever we say will fan the fires and it
 22 will be better to hold the 'no comment' line.
 23 I'll call Dan this a.m." and presumably she's
 24 talking about, in this context, Mr. Boone.
 25 She concludes with "the difficult part of

Page 105

1 the message to hear was that I think Dan said
 2 Ches still wants to proceed." She's talking
 3 about the class action. "I guess the key
 4 point of clarification is that all the
 5 patients who need to know knows. It's the
 6 general public and the media that doesn't have
 7 all the details and that is because it's
 8 before the Court." Now ma'am, what was your
 9 view at the time?
 10 MS. BONNELL:
 11 A. That was my view, that I believed that all the
 12 patients were informed and that the media were
 13 misinformed and that we had played a major
 14 role in that process and that we had not
 15 spoken with clarity to the media and
 16 therefore, the public was confused by
 17 everything.
 18 COFFEY, Q.C.:
 19 Q. So by Wednesday, the 16th--you said that the
 20 patients were informed. The patients were
 21 informed as to what, other than their
 22 individual results? What were they informed
 23 about, anything else?
 24 MS. BONNELL:
 25 A. No.

Page 107

1 This is an e-mail of May 16th 2007 at 4:25
 2 p.m. from yourself to Mr. Tilley, Mr. Dodge
 3 and Oscar Howell. The subject is ER/PR,
 4 private and confidential. "Why should we
 5 speak publicly?" You say "our credibility as
 6 an organization and our ability to provide
 7 quality care are being maligned. When you
 8 don't speak, the story continues with or
 9 without"--I presume "with or without you" is
 10 probably what you meant to say, "and the media
 11 look for less credible spokespeople who will
 12 speak to them. Hence, Peter Dawe, Geri
 13 Rogers, Ches Crosbie... Two things happen when
 14 you don't stand up to bad press. One, the
 15 public automatically assumes that there's a
 16 good reason why you're being quiet and that
 17 there must be something to the allegations,
 18 and two, just like the school yard bullies, an
 19 individual with an axe to grind feels
 20 uninhibited and will keep digging and
 21 digging." Fourth bullet, "moreover, a gang
 22 mentality develops. I am already seeing this
 23 amongst the press themselves who
 24 automatically, assuming that the organization
 25 is lying to hide the true facts, 'if they

Page 106

1 COFFEY, Q.C.:
 2 Q. So they wouldn't have known anything about
 3 causative factors?
 4 MS. BONNELL:
 5 A. No, but there was a class action lawsuit under
 6 way to talk about the causative factors.
 7 COFFEY, Q.C.:
 8 Q. But in terms of what they knew, okay, the
 9 patients knew only their own results?
 10 MS. BONNELL:
 11 A. They knew their own results.
 12 COFFEY, Q.C.:
 13 Q. Okay.
 14 MS. BONNELL:
 15 A. And anything that we had said in the media and
 16 others had said in the media, that was all
 17 playing a part in what the public and the
 18 patients would have known.
 19 COFFEY, Q.C.:
 20 Q. If we could, please, Exhibit P-1417?
 21 THE COMMISSIONER:
 22 Q. Wherever you can find a convenient spot, we'll
 23 have the morning break.
 24 COFFEY, Q.C.:
 25 Q. Thank you, Commissioner. Page three, please.

Page 108

1 don't defend themselves, then they must be a
 2 pack'" It should be, I presume "'a pack of
 3 liars.' Bad stories come and bad stories go.
 4 I don't suggest for a moment that we should
 5 jump to react on every bad story. That would
 6 not be responsible, ethical or sensible.
 7 However this issue is not just any issue.
 8 We've been dealing with this one for two years
 9 and we had been acting in good faith in the
 10 best interest of patients, knowing the full
 11 consequences and we're letting the media beat
 12 us up on the wrong issue."
 13 Number four, "if they want to criticize
 14 us for negatively impacting 117 people, so be
 15 it. We should be held accountable. However,
 16 we shouldn't allow the media to unfairly
 17 criticize us for (a) admitting we negatively
 18 impacted patients publicly, but (b) refusing
 19 to play the numbers game, and (c) respecting
 20 the legal system once action was initiated."
 21 And the final bullet, "we are also allowing
 22 the Canadian Cancer Society to leave the
 23 general public with the impression that there
 24 are 'a new group of women.' This is causing
 25 confusion and we are getting calls asking us

Page 109

1 about this. There's a new level of fear and
 2 anxiety that Peter Dawe is creating and then
 3 blaming us for." And then you go on in the
 4 next heading to talk about "what could we
 5 possibly say to the media?"
 6 Ma'am, when you look down through "what
 7 could we possibly say to the media?" are you
 8 actually advocating here that you say
 9 anything?
 10 MS. BONNELL:
 11 A. Yes, absolutely. I'm advocating that we
 12 should be speaking to the media.
 13 COFFEY, Q.C.:
 14 Q. What is it you're--do you suggest here that
 15 you should say?
 16 MS. BONNELL:
 17 A. These are things that I feel that we should be
 18 saying, that we should be talking. I guess my
 19 point in writing this e-mail, and I'd like to
 20 put it in context, if I could.
 21 COFFEY, Q.C.:
 22 Q. Yes.
 23 MS. BONNELL:
 24 A. This is an e-mail that since I saw it in
 25 preparation for drawing all the materials

Page 111

1 knew we had messed this up, and that we had
 2 nobody to blame but ourselves. I was
 3 frustrated because I felt that over the last
 4 year, we had handled this issue very
 5 ineffectively from a communications
 6 perspective, and I think I was reacting to the
 7 two-day onslaught of media coverage, you know,
 8 a lot of which was--I can say on one side, it
 9 was unfair, but on the other side, why did we
 10 deserve fair coverage? Because we hadn't
 11 demanded the respect that--and we hadn't
 12 earned the respect that we should have earned.
 13 We hadn't handled the issue well, I felt.
 14 I felt like we were being beat up and in a
 15 moment of frustration, I said these things,
 16 but they never impacted on--they're not
 17 reflective of anybody but my own frustration
 18 at that moment in time.
 19 As to the credibility issue, I mean, in
 20 terms of the media, the media always will look
 21 for the most credible spokesperson on an
 22 issue. That's good journalism. It's good
 23 journalism to say who's the most credible
 24 spokesperson on an issue. And in terms of
 25 Eastern Health, the individual--the people

Page 110

1 together for the Commission, that I've been
 2 dreading talking about, because it seems to
 3 characterize me and the organization in a way
 4 that I just--it's horrible to see. I was
 5 frustrated. I was tired. I hadn't slept the
 6 night before. I'd worked right through the
 7 night, and I wrote this e-mail to my boss and
 8 to the two individuals that I had to deal with
 9 on this particular issue.
 10 It was private, and the messages that are
 11 in there are not even ways that I feel about
 12 these individuals. I think I felt--I felt as
 13 if we'd been backed into a corner, and I went
 14 on the offensive. I mean, the issue of
 15 credibility, we can talk about that.
 16 The one that bothers me the most in that
 17 initial salvo of bullets there is that last
 18 bullet, that this is somehow Mr. Dawe's fault,
 19 and it's just patently false, and I never even
 20 felt that way beyond that moment that I, in
 21 anger, whipped out this e-mail.
 22 COFFEY, Q.C.:
 23 Q. Why were you angry, ma'am?
 24 MS. BONNELL:
 25 A. I was frustrated. I was frustrated because I

Page 112

1 with the most knowledge about this issue, the
 2 individuals or the group that should be the
 3 most credible, should be spokespeople from
 4 Eastern Health. But Eastern Health was absent
 5 from the discussion, and so therefore they
 6 went to whoever was willing to talk about it
 7 and three credible individuals in the
 8 community, Peter Dawe, Geri Rogers and Mr.
 9 Crosbie were quite willing to speak to the
 10 media about this issue. And so my issue of
 11 credibility was not that they're less credible
 12 individuals, because they're not, and I've
 13 never felt that way, but the issue was that
 14 the most credible individuals to speak on this
 15 should have been our own people, and that's
 16 what I meant by the credibility issue.
 17 COFFEY, Q.C.:
 18 Q. And with respect to that, I take it, your own
 19 people, as it were, consciously,
 20 intentionally, having thought it through, were
 21 not prepared to speak?
 22 MS. BONNELL:
 23 A. That's correct. You know, this e-mail, when
 24 you read it, you know, I've written thousands
 25 and thousands of e-mails, I get 100 e-mails a

Page 113

1 day, you know, it's written in a raw and rash
 2 way, it's a salvo, it's a smack across the
 3 bow, I'm trying to get somebody to listen to
 4 me, and I wrote in a--it's one of these e-
 5 mails that, you know, you always say, I say to
 6 my children, you know, "Don't put anything in
 7 writing that you wouldn't want to defend."
 8 This is one of those things, sir. It's
 9 indefensible.

10 COFFEY, Q.C.:

11 Q. Ma'am, with respect to this, did you ever hear
 12 back from Mr. Tilley or Mr. Dawe or Oscar
 13 Howell about it?

14 MS. BONNELL:

15 A. Other than a decision was quickly made that we
 16 were going to be a briefing, a press
 17 conference, nobody ever spoke to me about this
 18 e-mail. I would hope--I mean, I've seen my
 19 staff have written things in frustration to me
 20 and I look at it and I say not--this is a case
 21 of an individual saying something that needs
 22 to be corrected so for the public record it's
 23 corrected. I would hope that when these
 24 people looked at this, they had a sense of the
 25 amount of stress that I was in under on that

Page 115

1 believe that to be the case. But now, I'm not
 2 a -

3 COFFEY, Q.C.:

4 Q. I appreciate that, lawyer or a doctor, I
 5 appreciate that. But what I'm getting at here
 6 is from your perspective you were telling your
 7 bosses, as it were, that on the 117, well, so
 8 be it?

9 MS. BONNELL:

10 A. That the individuals that were not given an
 11 opportunity to, you know, have a treatment
 12 change that, you know, I mean, we always--you
 13 know, I mean, I felt when we did the briefing
 14 in December that, you know, and everybody felt
 15 that, you know, it was terrible, that there
 16 were these individuals who had been impacted
 17 in this way. And I have breast cancer
 18 survivors in my family and amongst my close
 19 friends and cancer touches us all, you know,
 20 it's terrible.

21 COFFEY, Q.C.:

22 Q. Thank you, Commissioner.

23 COMMISSIONER:

24 Q. Take fifteen.

25 (RECESS)

Page 114

1 day.

2 COFFEY, Q.C.:

3 Q. Ma'am, before we break, Commissioner, one
 4 final question about this. You say "If they
 5 want to criticize us for negatively impacting
 6 117 people, so be it." Okay. That's the
 7 second-last bullet under the first heading.
 8 "Why should we speak publicly?" Ma'am, what
 9 was it that you thought perhaps the media
 10 should, at this point in time, be properly
 11 criticizing you for? Because I take it the
 12 117 doesn't include the dead?

13 MS. BONNELL:

14 A. No.

15 COFFEY, Q.C.:

16 Q. Does it?

17 MS. BONNELL:

18 A. No.

19 COFFEY, Q.C.:

20 Q. So what was it, this is an acknowledgement by
 21 yourself that perhaps, certainly in terms of
 22 at least those 117, that Eastern Health had
 23 something to answer for?

24 MS. BONNELL:

25 A. That there's some accountability, yes. I do

Page 116

1 COMMISSIONER:

2 Q. Please be seated. Mr. Coffey.

3 COFFEY, Q.C.:

4 Q. Thank you, Commissioner. Ms. Bonnell, you've
 5 told the Commissioner this morning that when
 6 Mr. Quinn had contacted you the week before
 7 and this one from The Current.

8 MS. BONNELL:

9 A. I believe it was Heather Barrett.

10 COFFEY, Q.C.:

11 Q. Ms. Barrett. Certainly when Mr. Quinn
 12 contacted you, you spoke to Dr. Howell and Mr.
 13 Tilley and asked them or urged them to at
 14 least say something publicly. And when did
 15 your view in that regard finally prevail?

16 MS. BONNELL:

17 A. A decision was made on Wednesday at some point
 18 that we would hold a press conference on
 19 Thursday. Mr. Tilley had also been to see the
 20 cabinet around that time.

21 COFFEY, Q.C.:

22 Q. Actually, Wednesday is the day of your e-mail.

23 MS. BONNELL:

24 A. Yes.

25 COFFEY, Q.C.:

Page 117

1 Q. We just dealt with. Late that afternoon, 4:25
 2 p.m.
 3 MS. BONNELL:
 4 A. Yes.
 5 COFFEY, Q.C.:
 6 Q. The evidence before the Commissioner indicates
 7 that on Thursday, May 17th, that morning the
 8 cabinet was briefed.
 9 MS. BONNELL:
 10 A. Okay, there you go, then. Yes, that's right.
 11 COFFEY, Q.C.:
 12 Q. Now were you involved in that briefing at all?
 13 MS. BONNELL:
 14 A. No.
 15 COFFEY, Q.C.:
 16 Q. You weren't asked to go to the confederation
 17 building?
 18 MS. BONNELL:
 19 A. No.
 20 COFFEY, Q.C.:
 21 Q. Okay. And the press conference, we
 22 understand, was May 18th?
 23 MS. BONNELL:
 24 A. That's right.
 25 COFFEY, Q.C.:

Page 119

1 of understanding or an acceptance that we were
 2 going to be speaking publicly, press
 3 conference or what it was going to be, I don't
 4 think that had been determined, really,
 5 internally, until after Mr. Tilley met with
 6 cabinet.
 7 COFFEY, Q.C.:
 8 Q. If we could, please, again, so the
 9 Commissioner has some sense of how things were
 10 unfolding on those several days, Exhibit P-
 11 0826, please? This is an e-mail of Wednesday,
 12 May 16th, 2007, 4:44 p.m. from yourself to
 13 Tansy Mundon and you write, "I know I sent
 14 this to you already, but just in case." And
 15 here you've attached all the materials you had
 16 sent, I gather, on December 11th?
 17 MS. BONNELL:
 18 A. Um-hm.
 19 COFFEY, Q.C.:
 20 Q. 2006. So you were making sure that Ms. Mundon
 21 -
 22 MS. BONNELL:
 23 A. Well, what was it that she asked me for?
 24 COFFEY, Q.C.:
 25 Q. Well, I don't know that -

Page 118

1 Q. That Friday?
 2 MS. BONNELL:
 3 A. That was a Friday, yes.
 4 COFFEY, Q.C.:
 5 Q. So it's your recollection that sometime on the
 6 16th, on Wednesday, a decision was made?
 7 MS. BONNELL:
 8 A. No, I'm wrong in that. It was the--it was
 9 after--it was the morning of the Thursday that
 10 we made the decision to do the press
 11 conference.
 12 COFFEY, Q.C.:
 13 Q. And what caused that?
 14 MS. BONNELL:
 15 A. Well, it was my understanding that it was that
 16 there were two factors, two mitigating
 17 factors. One was that there was an acceptance
 18 or a belief held within the organization that,
 19 yes, we were going to have to do something,
 20 and then that was supported by a request from
 21 government, and I thought it was cabinet,
 22 saying we should do something, so the two
 23 things coalesced. There was a, you know, I
 24 remember when we heard that cabinet was
 25 requesting that, that there was already a sort

Page 120

1 MS. BONNELL:
 2 A. It wasn't there, was it?
 3 COFFEY, Q.C.:
 4 Q. I don't--as best I can tell here. I'm not
 5 saying it's not, but I mean, I just, it's just
 6 kind of out of the sequence we have.
 7 MS. BONNELL:
 8 A. There must have been a request for what--I
 9 think at this point in time we were talking
 10 about what had you said at that December
 11 briefing.
 12 COFFEY, Q.C.:
 13 Q. Oh, okay. And -
 14 MS. BONNELL:
 15 A. So I provided this information. And then
 16 there were some questions, as well, about what
 17 did you say about the deceased, what did you
 18 say about rate or error, what did you say
 19 about this and that.
 20 COFFEY, Q.C.:
 21 Q. Yeah, I'll get to that, the deceased in a
 22 second.
 23 MS. BONNELL:
 24 A. Okay.
 25 COFFEY, Q.C.:

Page 121

1 Q. So here you're sending to Tansy, so the
 2 department knows, look, this is what I sent
 3 you before?
 4 MS. BONNELL:
 5 A. Right.
 6 COFFEY, Q.C.:
 7 Q. And you send it all again. But the comment,
 8 "I know I sent this to you already," the
 9 already is December of '06?
 10 MS. BONNELL:
 11 A. Yes.
 12 COFFEY, Q.C.:
 13 Q. Okay. If we could, please, Exhibit P-0189?
 14 Now, this is an e-mail from yourself, again,
 15 to Ms. Mundon, at 4:46 p.m., two minutes
 16 later. "This might help, as well, re: the
 17 dead." And you're forwarding an e-mail from
 18 George Tilley, December 10th, 2006 at 2:57
 19 that he had sent back in December, this is an
 20 e-mail where he acknowledges your materials
 21 saying, "This is very comprehensive." And
 22 below that there's an e-mail December 9th,
 23 2006 at 6:21 p.m. from yourself to a number of
 24 individuals saying "Materials for tomorrow."
 25 And that's the one -

Page 123

1 MS. BONNELL:
 2 A. There was, you know, there was--there's little
 3 bits of it in the e-mail exchange. There was
 4 phone conversations flying back and forth
 5 between the two offices. I mean, there were--
 6 this issue was a big issue in the House of
 7 Assembly that week, as I'm sure you're aware,
 8 and we were getting--it was a, you know,
 9 fulltime job to keep up with the requests for
 10 information that were coming from the
 11 department sort of on a minute-by-minute basis
 12 as issues were being raised through question
 13 period and in meetings with the press and that
 14 sort of thing over that period. It was a
 15 pretty rapid fire couple of days.
 16 COFFEY, Q.C.:
 17 Q. As that week--as this broke in the media on
 18 May 15th, as that week went on, when did you
 19 become, I'll put it, fully engaged with the
 20 department on this issue? This is Wednesday
 21 afternoon. The e-mails were -
 22 MS. BONNELL:
 23 A. Certainly by--certainly the first day that it
 24 broke, I don't recall--I'd have to look at the
 25 media coverage to get a sense of how it went,

Page 122

1 MS. BONNELL:
 2 A. Yes.
 3 COFFEY, Q.C.:
 4 Q. - we'd seen earlier, which in the final
 5 paragraph refers to "Re: the dead."
 6 MS. BONNELL:
 7 A. Yes.
 8 COFFEY, Q.C.:
 9 Q. So you were -
 10 MS. BONNELL:
 11 A. I believe the minister was being pressed on
 12 that particular issue and she was looking for
 13 what Eastern Health, what comments Eastern
 14 Health had made in that regard.
 15 COFFEY, Q.C.:
 16 Q. The minister as being pressed in May of '07?
 17 MS. BONNELL:
 18 A. Yes.
 19 COFFEY, Q.C.:
 20 Q. On the issue of the deceased?
 21 MS. BONNELL:
 22 A. Yes.
 23 COFFEY, Q.C.:
 24 Q. And you were asked to do, particularly
 25 identify the materials on the deceased?

Page 124

1 but I think by Wednesday it was out of
 2 control.
 3 COFFEY, Q.C.:
 4 Q. And the interaction between the department and
 5 yourself?
 6 MS. BONNELL:
 7 A. Well, the interaction between my counterpart
 8 and I and I would suspect others in the
 9 organization and their counterparts in the
 10 department might have been having the same
 11 kind of thing happening.
 12 COFFEY, Q.C.:
 13 Q. Ma'am, if we could look, please, at Exhibit P-
 14 0439? This is again an e-mail on the same day
 15 from May 16th at 4:57 p.m. from Heather
 16 Predham to a number of people, including
 17 yourself, Dr. Howell and Mr. Tilley and Ms.
 18 Pilgrim, Pam Elliott. She writes, "I just
 19 wanted to give you an update on the calls we,
 20 Nancy mostly, has received today re: ER/PR."
 21 MS. BONNELL:
 22 A. Um-hm.
 23 COFFEY, Q.C.:
 24 Q. And there are seven noted, seven different
 25 paragraphs numbered. No. 4, "A lady called

Page 125

1 saying she had just--had been called and told
 2 she was going to be retested, but she had
 3 heard nothing else. She was confirmed
 4 negative and was noted to have been contacted.
 5 (This highlights the fact that all of this was
 6 done verbally and maybe we should have written
 7 follow-up letters to all the confirmed
 8 negative???)". Ma'am, I refer to that, ma'am,
 9 because at this point in time, like, as that
 10 week was going on, were you becoming aware
 11 that maybe everybody had not been contacted?
 12 MS. BONNELL:
 13 A. No. Other than what was originally noted when
 14 we spoke this morning, no, I wasn't aware that
 15 there was contact problems, not in the sense I
 16 think you're asking me.
 17 COFFEY, Q.C.:
 18 Q. Yes.
 19 MS. BONNELL:
 20 A. Other than things like this. And you can see
 21 the other calls, a number of them are people
 22 who were--I mean, it's indicative of what I
 23 say when I say that it was clear to me that we
 24 had probably been ineffective in communicating
 25 because the stories were so confusing to

Page 127

1 written and it always fell to the bottom of
 2 the list. And in the fall of 2006 I
 3 approached my vice president about the need
 4 for us to put some effort into getting this
 5 done in a quicker way than we could accomplish
 6 in house. So we went outside and had some
 7 proposals come in from various companies in
 8 the City of St. John's and Bristol
 9 Communications was selected to do that work
 10 for us. In, I guess that decision would have
 11 been made in probably March. And then
 12 throughout April we were starting to do the
 13 planning around that.
 14 COFFEY, Q.C.:
 15 Q. Um-hm.
 16 MS. BONNELL:
 17 A. And so I was in more frequent contact, I
 18 guess, actually, with Carolyn Chaplin, who was
 19 with Bristol at that point in time. And when
 20 this happened in May, Carolyn made contact
 21 with me probably maybe the first day or the
 22 second day just sort of how are you doing sort
 23 of e-mail, can we be of any help. And on the
 24 Thursday, I went to my vice president and I
 25 told him that I didn't feel that I could

Page 126

1 people, people calling about diagnostic tests
 2 and people who were negative and wondered if
 3 this was them now. I guess that's part of
 4 what I mean when I say that the coverage was
 5 very confusing and in the absence of us out
 6 there, there's nobody else really talking
 7 about it.
 8 COFFEY, Q.C.:
 9 Q. If we--was Eastern Health at this point, did
 10 you retain any outside expertise involving
 11 communications?
 12 MS. BONNELL:
 13 A. Yes, in February of 2007, I think I'm right on
 14 that, we put a limited request for proposals
 15 for a company to write a crisis communications
 16 strategy for the organization. It was
 17 definitely an identified need from the start
 18 of Eastern Health because there wasn't a
 19 crisis communications strategy that existed in
 20 any of the former organizations that dealt
 21 with anything really beyond the sort of
 22 emergency, you know, fire, plane crash, flood,
 23 that kind of, there was a couple of those in
 24 existence. And we made, as department we
 25 made several attempts to get one of those

Page 128

1 effectively handle this on my own and that I
 2 required someone's assistance. You know, here
 3 we were Thursday morning, we're talking about
 4 doing a briefing on Friday, just arranging,
 5 well, not a briefing but a press conference,
 6 so arranging everything that had to be
 7 arranged in terms of that and then on top of
 8 that writing speaking notes and preparing Q
 9 and As and all the various things that go into
 10 a press conference, I just didn't feel I was
 11 in a position to be able to do that on my own.
 12 And I was very stressed and tired and felt
 13 that an extra set of eyes would be beneficial,
 14 as well. So I called, made contact with
 15 Carolyn. She wasn't in the province, I don't
 16 believe, or was not available and she offered
 17 another associate, Cathy Dornan, who assisted
 18 us that Thursday night in preparing for the
 19 press conference.
 20 COFFEY, Q.C.:
 21 Q. So what assistance did she provide and what
 22 did you do with her?
 23 MS. BONNELL:
 24 A. Mr. Tilley held a meeting on Thursday night.
 25 It started probably 5 or 6 o'clock, I don't

Page 129

1 remember, and went until 9 or 10 o'clock,
 2 something like that in which he asked for a
 3 variety of people to come and provide him with
 4 their expert advice, opinion. It was a wide
 5 variety of people, people who had been
 6 involved since the start as well as some
 7 others. We met, we talked, we talked about
 8 what he would say the next day. We had a
 9 rough sketch of speaking points. Ms. Dornan
 10 took those away, I took them away. We started
 11 both of us hammering out speaking points for
 12 Mr. Tilley and those sort of coalesced with
 13 George over the night and in the next morning.
 14 And I can't remember exactly how we divided
 15 the labour, but I think Cathy took the
 16 speaking points and I did the Q and A or
 17 something like that, and then I took the Q and
 18 A that--or the speaking points that Cathy had
 19 written and worked on them with George.
 20 COFFEY, Q.C.:
 21 Q. Okay.
 22 MS. BONNELL:
 23 A. And then she came in the next morning. I
 24 remember Ms. Mundon asking for--wanting to see
 25 stuff, wanting to see stuff and I think

Page 131

1 says, "I don't want to get in your way, I know
 2 how frustrating that will be. I'll give you a
 3 call around 9:00 a.m." So I take it that's
 4 the series of e-mails -
 5 MS. BONNELL:
 6 A. That's it, and then Ms. Mundon and I think Ms.
 7 Hennessey actually came over for the briefing
 8 itself.
 9 COFFEY, Q.C.:
 10 Q. Before I get to that, your interpretation of
 11 that was what, in this -
 12 MS. BONNELL:
 13 A. I was not interpreting anything at that point.
 14 COFFEY, Q.C.:
 15 Q. Well in terms of, from the perspective of
 16 you're on your own?
 17 MS. BONNELL:
 18 A. Oh no, no, I didn't interpret it that way at
 19 all. I thought she was trying to stay out of
 20 my way.
 21 COFFEY, Q.C.:
 22 Q. Okay. And if we could, please, exhibit P-
 23 0832, it's an e-mail from Ms. Mundon to
 24 yourself, the same morning at 9:06 a.m.
 25 Subject is "A briefing note".

Page 130

1 there's probably an e-mail to the effect of me
 2 saying to her, look, it's all being written as
 3 we speak, come over and sit with us and help
 4 us work through it. At that point, any extra
 5 set of hands and eyes and ears would have been
 6 helpful. They chose not to do that, but they
 7 were--they did come in the morning and did
 8 come for the briefing.
 9 COFFEY, Q.C.:
 10 Q. Exhibit P-0831. Ms. Bonnell, this is a series
 11 of e-mails, the one at the bottom of the page
 12 is from Tansy Mundon, May 18th, Friday, 2007
 13 at 7:09 a.m. to yourself, materials for
 14 briefing. She says, "Susan, can you please e-
 15 mail me materials for the media briefing
 16 today. Thanks." And you responded at 7: 20
 17 a.m. saying, "We are still developing them,
 18 Tansy, we were here until midnight, back again
 19 now to complete. Please feel welcome to come
 20 over here this morning. I'm concerned on our
 21 ability to give you really advanced materials
 22 as this is happening so quickly. I'd
 23 appreciate your presence as we develop and
 24 refine our messaging this morning." And then
 25 finally, about 7:59 a.m., she comes back and

Page 132

1 MS. BONNELL:
 2 A. Uh-hm.
 3 COFFEY, Q.C.:
 4 Q. This is a briefing note dated May 17th, 2007.
 5 MS. BONNELL:
 6 A. Uh-hm.
 7 COFFEY, Q.C.:
 8 Q. And it's a question and answer briefing note
 9 for the Department of Health and Community
 10 Services, I take it prepared for the Minister.
 11 Do you recall why it was that Ms. Mundon was
 12 sending this to you that morning?
 13 MS. BONNELL:
 14 A. We were sharing messaging back and forth.
 15 COFFEY, Q.C.:
 16 Q. And why was that?
 17 MS. BONNELL:
 18 A. In an attempt to--and there's places where the
 19 authority and the government are going to
 20 choose to differ, but there's also places
 21 where you would want to be seen as being on
 22 the same page as well, and it wouldn't be
 23 unusual for the health authority and
 24 government to share key messages and to share
 25 information. These are the questions she was

Page 133

1 anticipating being asked. She might have sent
 2 them to me for that purpose, I don't recall
 3 specifically why she sent it to me.
 4 COFFEY, Q.C.:
 5 Q. Do you recall what it was that you differed
 6 on?
 7 MS. BONNELL:
 8 A. I don't--to be honest with you, Mr. Coffey, I
 9 don't actually believe I read this that
 10 morning.
 11 COFFEY, Q.C.:
 12 Q. Do you recall, not so much this because you're
 13 talking now, I think, generally about, you
 14 know, messaging and exchanging messaging
 15 approaches.
 16 MS. BONNELL:
 17 A. Well up to this point you'd see the kind of
 18 exchange that was going back, what did you
 19 guys say about this, what did you say about
 20 that? Part of it is to inform the Minister so
 21 that he knows what we said and part of it is
 22 to share messaging on issues that he would
 23 have no information on, I guess.
 24 COFFEY, Q.C.:
 25 Q. I appreciate that you are sending them to--the

Page 135

1 A. Well this is anticipated questions, I don't
 2 know if it goes into key messages, does it?
 3 COFFEY, Q.C.:
 4 Q. Oh yes, any time you see a Q and A, you will
 5 see a key message.
 6 MS. BONNELL:
 7 A. There we go, okay, yeah.
 8 COFFEY, Q.C.:
 9 Q. So your understanding was that the purpose of
 10 doing so was so that the government and the
 11 department and Eastern Health would be
 12 speaking from the same pages or be consistent
 13 in their messaging?
 14 MS. BONNELL:
 15 A. You know on this morning, government's
 16 messaging was not a focus for us and I think,
 17 you know, the--Mr. Tilley was focused on
 18 trying to take some ownership back of the
 19 issue. I mean, it had been in the government
 20 realm for the last week. We had seen
 21 everybody talking about it at government
 22 levels for the last week and our focus was on
 23 our own--our own issues at that point.
 24 There's some messages about government, I
 25 think, included in Mr. Tilley's speaking notes

Page 134

1 department would accomplish that, but how
 2 about the department sending it to you?
 3 MS. BONNELL:
 4 A. As in these are the things that we want you to
 5 say in this regard or -
 6 COFFEY, Q.C.:
 7 Q. Well I don't know, I'm just asking you here,
 8 did you ever receive a briefing note on ER/PR
 9 from the government before?
 10 MS. BONNELL:
 11 A. No.
 12 COFFEY, Q.C.:
 13 Q. So this is the first?
 14 MS. BONNELL:
 15 A. Yes. And I don't remember reading it that
 16 morning.
 17 COFFEY, Q.C.:
 18 Q. Did you ever receive another one afterward, do
 19 you recall?
 20 MS. BONNELL:
 21 A. No.
 22 COFFEY, Q.C.:
 23 Q. And in terms of this exchange of key messaging
 24 -
 25 MS. BONNELL:

Page 136

1 that he gave at that time, but I don't
 2 remember receiving this and saying, okay, now
 3 I've got to work all these messages into what
 4 we have here, we didn't do that.
 5 COFFEY, Q.C.:
 6 Q. Was there any concern that the government,
 7 that you not contradict the government?
 8 MS. BONNELL:
 9 A. I just don't recall that being part of the
 10 focus that morning. From time to time that is
 11 the case, though, that you wouldn't want to
 12 find yourselves on opposite sides of an issue,
 13 you would want to stand together. But I don't
 14 think it had any impact whatsoever on what was
 15 delivered on that Friday.
 16 COFFEY, Q.C.:
 17 Q. Now your understanding of the purpose of the
 18 May 18th, 2007 media briefing or press
 19 conference was what?
 20 MS. BONNELL:
 21 A. To address the issue, to try and clarify some
 22 of the confusion that had been raised during
 23 the week, to try and establish leadership
 24 within Eastern Health for the issue, that
 25 there was leadership on the issue.

Page 137

1 COFFEY, Q.C.:

2 Q. So Bristol was involved by this point?

3 MS. BONNELL:

4 A. Bristol was involved from a cursory way at

5 this point, yes.

6 COFFEY, Q.C.:

7 Q. Did they become more heavily involved as May

8 went on?

9 MS. BONNELL:

10 A. Not until after--it's my understanding that,

11 as you know, I'm no longer the director of

12 strategic communications, but I understand

13 that Bristol has a contract to assist the

14 organization through this process of the

15 Commission of Inquiry.

16 COFFEY, Q.C.:

17 Q. No, I'm thinking in May itself, May of '07,

18 were they more -

19 MS. BONNELL:

20 A. No, I don't recall them being more involved,

21 it would have been less involved.

22 COFFEY, Q.C.:

23 Q. Okay. If you look, please, at exhibit P-0443?

24 Now just looking at page 2 of this, it's a

25 media statement. I take it these are the

Page 139

1 COFFEY, Q.C.:

2 Q. Now, you understood that Mr. Tilley--well

3 first of all, you did attend the media

4 briefing?

5 MS. BONNELL:

6 A. Oh yes.

7 COFFEY, Q.C.:

8 Q. You understood Mr. Tilley was going to speak

9 about numbers, in fact, distributed all the

10 numbers.

11 MS. BONNELL:

12 A. Yes.

13 COFFEY, Q.C.:

14 Q. Can you tell us please whether or not the

15 causation issue was going to be addressed?

16 MS. BONNELL:

17 A. No.

18 COFFEY, Q.C.:

19 Q. Was there any discussion before the media

20 briefing about that?

21 MS. BONNELL:

22 A. No, it wasn't discussed. We were responding

23 really to the stories that had been printed or

24 filed in the previous days leading up to that

25 and the issue of numbers and rate of error was

Page 138

1 speaking notes for Mr. Tilley.

2 MS. BONNELL:

3 A. Yes.

4 COFFEY, Q.C.:

5 Q. For that press conference. Page 7 says, "I

6 will now take your questions." And then

7 there's a statement of statistics on Eastern

8 Health letterhead, page 8.

9 MS. BONNELL:

10 A. We provided that to the media who were present

11 there that day.

12 COFFEY, Q.C.:

13 Q. Filed in Court affidavits dated February and

14 March, 2007, there's an ER/PR retesting

15 chronology?

16 MS. BONNELL:

17 A. Yes.

18 COFFEY, Q.C.:

19 Q. On Eastern Health letterhead, May 18th, 2007,

20 was that provided to media that day?

21 MS. BONNELL:

22 A. It was, something like that was also provided

23 to the media at the briefing, that was just an

24 extension of what was provided at the briefing

25 in December.

Page 140

1 what was at the media's focus at that point in

2 time. And I think we probably made reference

3 to the fact that the class action lawsuit was

4 progressing because I think it would have

5 been--it was actually certified, I believe, or

6 was going through that process that week, if I

7 recall, and--or maybe the next week, but I

8 think Mr. Tilley may have made some reference

9 to that in his speaking notes, I'm not sure, I

10 don't recall.

11 COFFEY, Q.C.:

12 Q. Do you know if the media raised it?

13 MS. BONNELL:

14 A. No, they didn't. I don't believe they did.

15 COFFEY, Q.C.:

16 Q. From your perspective, how did it go?

17 MS. BONNELL:

18 A. It was good, it received--well I mean, I guess

19 I was surprised to see the CBC Newsworld truck

20 pulling up for live coverage on CBC Newsworld,

21 I don't think we realized the extent to which

22 this became an interest nationally at that

23 point as well. All the reporters were there,

24 several key stakeholder groups were

25 represented and Mr. Tilley was accompanied by

Page 141

1 a panel of experts who could address other
 2 issues that he didn't feel comfortable
 3 addressing, and I thought the media were very
 4 respectful of him and appreciative that he was
 5 speaking. Coverage was extensive, there were
 6 a couple of errors in the coverage that we
 7 attempted to have corrected quickly. Breast
 8 screening, for example, came up again, so
 9 whenever those things came forward, we tried
 10 to stop that as quickly as possible, but all
 11 in all, I thought it was, you know, a positive
 12 thing, I suppose, if you could say that.

13 COFFEY, Q.C.:

14 Q. Exhibit P-0837 please? This is an e-mail from
 15 John Abbott of May 18th, 2007 at 12:52 p.m. to
 16 yourself, he's forwarding a story or an
 17 attachment "Opposition calls for counselling
 18 information line to diffuse breast cancer
 19 confusion." And when we look at the
 20 attachment that was sent to you, is an e-mail
 21 from Josephine Cheeseman at 12:43 p.m. on the
 22 same date to a number of individuals,
 23 including Mr. Crawley, Ms. Turpin, Ms.
 24 Matthews, John Abbott, Moira Hennessey and Mr.
 25 Thompson and so on. Prior to that morning,

Page 143

1 right, it was about breast cancer screening,
 2 as opposed to what we were talking about.

3 COFFEY, Q.C.:

4 Q. P-0841 please? Here, this is an e-mail from
 5 Ms. Mundon to yourself at 2:52 on May 18th and
 6 copied to others. Subject is "Clarification".
 7 "Susan, VOCM is reporting the issue as breast
 8 cancer 'screening', can you please call to
 9 correct. Thanks, Tansy." So I take it the
 10 department and yourself were monitoring this
 11 and you were the one who was charged with
 12 making the calls to clarify?

13 MS. BONNELL:

14 A. Yes.

15 COFFEY, Q.C.:

16 Q. And did you do so?

17 MS. BONNELL:

18 A. Yes.

19 COFFEY, Q.C.:

20 Q. If we could, exhibit P-0845 please? This is
 21 an e-mail on the same day from Tansy Mundon to
 22 yourself, 5:06 p.m. Subject is "Transcripts.
 23 Susan, I have arranged for 709 News to e-mail
 24 both you and I all transcripts on this topic
 25 from 12:30 p.m. on today, including Newsworld

Page 142

1 Friday morning, were you aware of the level of
 2 involvement, apparent level of involvement in
 3 terms of coverage or following by the Cabinet
 4 Secretariat and the Premier's office in this?

5 MS. BONNELL:

6 A. No, not in particular. I certainly knew that
 7 it was a very big topic in the House.

8 COFFEY, Q.C.:

9 Q. As to how detailed they might have been in
 10 following it, you weren't privy to?

11 MS. BONNELL:

12 A. No.

13 COFFEY, Q.C.:

14 Q. Looking at exhibit P-0841 please?

15 MS. BONNELL:

16 A. You can see in that one, as well, I was just
 17 reading down through it that Mr. Ball is
 18 calling--they're calling for it because of the
 19 thousands of women who've been screened for
 20 cancer and how they may be impacted, so you
 21 can see that that's sort of where the--
 22 "particularly women who have been screened for
 23 breast cancer"--in the third paragraph--"in
 24 the past decade deposed more personal
 25 questions"--you know, that's where it was,

Page 144

1 coverage. We will receive transcripts
 2 throughout the weekend and will discontinue on
 3 Tuesday a.m. Thanks for all your hard work on
 4 this, outstanding job at the briefing today.
 5 Please pass along my thanks to others."
 6 Signed Tansy.

7 MS. BONNELL:

8 A. We had our own--Eastern Health pays for media
 9 monitoring service, but it's a very nominal
 10 fee that we pay. What you really pay for is
 11 the transcripts and I remember having a
 12 conversation with Tansy, you know, in which I
 13 said, look, is it likely that your central
 14 communications office branch is going to be
 15 getting all these transcripts and she said,
 16 "Oh yes, definitely", so I asked to be copied
 17 rather than pay double for those.

18 COFFEY, Q.C.:

19 Q. And you understood that the department was
 20 following this?

21 MS. BONNELL:

22 A. Yes.

23 COFFEY, Q.C.:

24 Q. On a pretty well minute to minute -
 25 MS. BONNELL:

Page 145

1 A. Yes.
 2 COFFEY, Q.C.:
 3 Q. Including getting transcripts.
 4 MS. BONNELL:
 5 A. Yes.
 6 COFFEY, Q.C.:
 7 Q. If I could, please, exhibit P-0869. This is
 8 two e-mails between yourself and Ms. Mundon.
 9 The first, May 21st, which would be a Monday
 10 at 11:32. The subject is "Tomorrow. Susan, I
 11 need to talk to give you a heads up on
 12 something for tomorrow's briefing. I also
 13 need to discuss another issue with you ASAP.
 14 Can you please give me a call today on my
 15 cell?" Do you recall what that was about?
 16 MS. BONNELL:
 17 A. The other issue?
 18 COFFEY, Q.C.:
 19 Q. Yes.
 20 MS. BONNELL:
 21 A. Burin radiology.
 22 COFFEY, Q.C.:
 23 Q. If we could, please, exhibit P-0870? Now this
 24 is, again, some e-mails between yourself and
 25 Ms. Mundon, May 21st, 2007, the first at 3:34

Page 147

1 COFFEY, Q.C.:
 2 Q. When you say "pull together the slides", did
 3 you actually draft them?
 4 MS. BONNELL:
 5 A. A lot of the slides were taken from what we
 6 did for the media briefing in 200--I remember
 7 Dr. Howell maybe saying we're going to use
 8 that, make a few changes here and there. I
 9 can't remember very heavy involvement in this
 10 at all because my attentions were focused
 11 elsewhere at this point.
 12 COFFEY, Q.C.:
 13 Q. So where were your -
 14 MS. BONNELL:
 15 A. Well, I was trying to deal with the start of
 16 the radiology issue and deal with the fall out
 17 from the press briefing conference the Friday
 18 before.
 19 COFFEY, Q.C.:
 20 Q. And what fall out was -
 21 MS. BONNELL:
 22 A. Amongst other things.
 23 COFFEY, Q.C.:
 24 Q. What fall out was that?
 25 MS. BONNELL:

Page 146

1 p.m. "Susan, just noticed a small typo in the
 2 document distributed on Friday, the very last
 3 date should be February 2007, not February
 4 2006. Can we get this changed for tomorrow's
 5 briefing? Thanks." And then you responded at
 6 3:37 p.m. saying "It's done" and she says
 7 "Thank you." What briefing was this, the one
 8 on the 22nd of May, do you recall?
 9 MS. BONNELL:
 10 A. I'm thinking would this have been the briefing
 11 that we did for the MHAS?
 12 COFFEY, Q.C.:
 13 Q. If we could, please, exhibit P-0884? This is
 14 a PowerPoint deck for May 22nd, 2007, estrogen
 15 and progesterone testing, members of House of
 16 Assembly briefing.
 17 MS. BONNELL:
 18 A. Uh-hm.
 19 COFFEY, Q.C.:
 20 Q. That would be it. So were you involved in
 21 preparing for that?
 22 MS. BONNELL:
 23 A. Just in preparing the deck, really not much
 24 else. I think they would have asked me to
 25 pull together the slides, that was about it.

Page 148

1 A. We were just monitoring the coverage, making
 2 corrections as necessary, the media coverage.
 3 I was also on my own in the office without a
 4 media relation's person at that time, so I was
 5 having to pull in the other two communication
 6 professionals who worked with me who were off
 7 doing their own things too, so at this point
 8 it became impossible for me to handle these
 9 issues and I ended up pulling them into them
 10 as well, so that would have been around this
 11 time.
 12 COFFEY, Q.C.:
 13 Q. Now the briefing on May 22nd of the MHAS was a
 14 briefing by Eastern Health or by the
 15 department?
 16 MS. BONNELL:
 17 A. Well we did one, Eastern Health did one. It
 18 occurred at the Waterford in the conference--
 19 in the auditorium at the Waterford Hospital.
 20 COFFEY, Q.C.:
 21 Q. And from Eastern Health's perspective, who was
 22 primarily responsible for organizing it?
 23 MS. BONNELL:
 24 A. I believe it was Dr. Howell's office who
 25 organized that briefing, but I could stand to

Page 149

1 be corrected on that. I only attended small
 2 parts of it, I remember coming in and sitting
 3 for a little while and then having to leave
 4 again.
 5 COFFEY, Q.C.:
 6 Q. If we could, please, exhibit P-0459? Now this
 7 is a series of e-mails between Mr. Tilley,
 8 yourself, Heather Predham, Oscar Howell, it
 9 involves Tansy Mundon and others. This
 10 relates to the drafting of a letter to the
 11 editor of the Globe and Mail?
 12 MS. BONNELL:
 13 A. Yes, I remember this.
 14 COFFEY, Q.C.:
 15 Q. What, if any, involvement did you have in
 16 this?
 17 MS. BONNELL:
 18 A. I believe I wrote the original draft.
 19 COFFEY, Q.C.:
 20 Q. Okay. Who asked you to do that?
 21 MS. BONNELL:
 22 A. Mr. Tilley.
 23 COFFEY, Q.C.:
 24 Q. For what purpose?
 25 MS. BONNELL:

Page 151

1 Q. - it's a letter dated May 25, 2007 by Mr.
 2 Tilley. Have a look down through this,
 3 please.
 4 MS. BONNELL:
 5 A. Yes, that was it, that we told the breast
 6 cancer patients nothing.
 7 COFFEY, Q.C.:
 8 Q. So what was the concern?
 9 MS. BONNELL:
 10 A. That by implication we hadn't spoken to any of
 11 the patients whatsoever. I think at this
 12 point Mr. Tilley understood that it would be
 13 important--that it was important for us to
 14 react and to respond and to try to be more
 15 proactive. It may be a case of it being a bit
 16 too late at this point, that could certainly
 17 stand to be argued, but regardless at this
 18 point we were trying to be more active and
 19 responsive to things that were being printed.
 20 So he did this one, I believe government was
 21 doing one to this as well and there was also
 22 one done in response to a letter in the
 23 Packet, I believe.
 24 COFFEY, Q.C.:
 25 Q. So Mr. Tilley was prepared to be more

Page 150

1 A. To address the issues that were raised in the
 2 Globe and Mail piece that were of concern to
 3 us.
 4 COFFEY, Q.C.:
 5 Q. And so how did you identify those?
 6 MS. BONNELL:
 7 A. Perhaps if we had a look at the story, I'd
 8 remember what the issue was.
 9 COFFEY, Q.C.:
 10 Q. Let me see.
 11 MS. BONNELL:
 12 A. Or the letter to the editor, that might even
 13 do it.
 14 COFFEY, Q.C.:
 15 Q. Well the letter to the editor, itself,
 16 perhaps--if we could go to just page 3 of
 17 this, I apologize, page--I'm sorry, maybe
 18 exhibit P-0462? This is Mr. Tilley at 3:18 on
 19 May 25th, Friday, sending the letter--sending
 20 to them a copy of the letter he's sending to
 21 the Globe and Mail. If we look at page 3 of
 22 this exhibit -
 23 MS. BONNELL:
 24 A. Uh-hm.
 25 COFFEY, Q.C.:

Page 152

1 receptive to interacting with the media?
 2 MS. BONNELL:
 3 A. Yes.
 4 COFFEY, Q.C.:
 5 Q. By this point. If we could, please, looking
 6 at P-0462, in writing to the Board, Mr. Tilley
 7 says, he concludes by saying, "Susan Bonnell,
 8 the director of corporate communications
 9 department is assessing other opportunities to
 10 get out there, being sensitive to the
 11 situation at hand." Signed George.
 12 MS. BONNELL:
 13 A. Yes.
 14 COFFEY, Q.C.:
 15 Q. What was that?
 16 MS. BONNELL:
 17 A. Just that, sir, I think as well that I don't
 18 think, you know, there was any wavering sort
 19 of on the point that we couldn't--we still
 20 couldn't be talking about the matters that
 21 were before the class action, particularly the
 22 causative factors.
 23 COFFEY, Q.C.:
 24 Q. And now with respect to that May 18th press
 25 conference, do you know if at some point there

Page 153

1 was some thought being given to having Dr.
 2 Howell conduct a press conference, rather than
 3 Mr. Tilley? We all understand Mr. Tilley
 4 ended up doing it, but -
 5 MS. BONNELL:
 6 A. I don't think, if we did give it any
 7 consideration it wasn't very thorough
 8 consideration given to it, I think it was
 9 important for Mr. Tilley to do that press
 10 conference and I don't, myself, ever remember
 11 suggesting that Dr. Howell -
 12 COFFEY, Q.C.:
 13 Q. If not you, than somebody from Bristol
 14 suggesting that -
 15 MS. BONNELL:
 16 A. No, no, I do, as a matter of fact, recall
 17 Bristol feeling adamant that Mr. Tilley should
 18 do the press conference, that it was -
 19 COFFEY, Q.C.:
 20 Q. Yeah, that's what I'm getting at, Bristol
 21 being adamant that he -
 22 MS. BONNELL:
 23 A. Oh, absolutely, yes, yeah. I agreed. You
 24 know, all things being equal, it would make
 25 sense for Dr. Howell to do that, but because

Page 155

1 A. Yes.
 2 COFFEY, Q.C.:
 3 Q. Now, had you been aware of this before this?
 4 MS. BONNELL:
 5 A. Aware of the memo?
 6 COFFEY, Q.C.:
 7 Q. Yes.
 8 MS. BONNELL:
 9 A. Yes.
 10 COFFEY, Q.C.:
 11 Q. When did you learn about that?
 12 MS. BONNELL:
 13 A. Way back.
 14 COFFEY, Q.C.:
 15 Q. Way back when?
 16 MS. BONNELL:
 17 A. Yeah.
 18 COFFEY, Q.C.:
 19 Q. Okay. How about now in May, the fact that it
 20 was about to become public?
 21 MS. BONNELL:
 22 A. Was I aware -
 23 COFFEY, Q.C.:
 24 Q. Yes.
 25 MS. BONNELL:

Page 154

1 of where we had arrived at this particular
 2 point in time, I think it was a leadership
 3 issue and that he needed to do it?
 4 COFFEY, Q.C.:
 5 Q. If I could, please, exhibit P-0466? Now we
 6 understand around this time Mr. Tilley was
 7 preparing and had prepared a letter to send
 8 those external reviews over to John Abbott?
 9 MS. BONNELL:
 10 A. Um-hm.
 11 COFFEY, Q.C.:
 12 Q. Were you aware at the end of May that that was
 13 going on?
 14 MS. BONNELL:
 15 A. No.
 16 COFFEY, Q.C.:
 17 Q. Okay. Now this is an e-mail from Mr. Tilley
 18 May 31st, 2007 at 5 p.m., it's to, I gather,
 19 the board of trustees and to the executive
 20 team of Eastern Health, May, 2005, which would
 21 have included yourself. And he says, "In the
 22 House of Assembly yesterday the premier
 23 released an internal memo dated June, 2003 to
 24 the media." And this is the Dr. Ejeckam memo?
 25 MS. BONNELL:

Page 156

1 A. No. I saw it on the news. I think somebody
 2 called me and said, "Did you know that the
 3 premier just held the Ejeckam memo up in the
 4 house?" I had no knowledge that that was
 5 going to be done.
 6 COFFEY, Q.C.:
 7 Q. That having been done, what happened then in
 8 relation to it?
 9 MS. BONNELL:
 10 A. I pulled together, I think I said to Mr.
 11 Tilley, you know, "Okay, this is out there
 12 now, let's make sure that we release
 13 everything having anything to do with Dr.
 14 Ejeckam from this period of time."
 15 COFFEY, Q.C.:
 16 Q. Um-hm.
 17 MS. BONNELL:
 18 A. And I went to Mr. Denic and Mr. Cook and said
 19 to them, "Get everything, every document,
 20 every surgical committee note, everything that
 21 there is. We'll bring the CBC in," because it
 22 was the CBC who were seeking response on that.
 23 And we brought them in and we went through
 24 everything with them.
 25 COFFEY, Q.C.:

Page 157

1 Q. And now when we look at this, were you there
 2 when the CBC were there?
 3 MS. BONNELL:
 4 A. Yes.
 5 COFFEY, Q.C.:
 6 Q. Okay. Mr. Tilley says or notes "The questions
 7 of the media were many, including, why was
 8 something not done about this in 2003?" And
 9 he gives an answer.
 10 MS. BONNELL:
 11 A. Yes.
 12 COFFEY, Q.C.:
 13 Q. Or notes that he's given an answer. Do you
 14 know, to your knowledge, did anyone ever
 15 actually ask Dr. Ejeckam whether there had
 16 been a concern, a results concern back in
 17 2003?
 18 MS. BONNELL:
 19 A. I'm not sure.
 20 COFFEY, Q.C.:
 21 Q. Okay, well, you had never spoken to Dr.
 22 Ejeckam yourself?
 23 MS. BONNELL:
 24 A. No.
 25 COFFEY, Q.C.:

Page 159

1 COFFEY, Q.C.:
 2 Q. He also goes on to say, "They asked," they,
 3 the media, "asked as to why it was not shared
 4 with administration at the time, in 2003. We
 5 responded that it would not come to our
 6 attention unless there were specific
 7 recommendations flowing from it." Now, you've
 8 seen that June, 2003 memo?
 9 MS. BONNELL:
 10 A. Yes.
 11 COFFEY, Q.C.:
 12 Q. There are recommendations in it, aren't there?
 13 MS. BONNELL:
 14 A. Yes, but I think what Mr. Tilley was talking
 15 about was things that would require
 16 administrative input, like financial matters
 17 as opposed to the ones that, you know, when it
 18 can be dealt within the lab setting as opposed
 19 to -
 20 COFFEY, Q.C.:
 21 Q. If we could, the next page of this? He
 22 concludes by, Mr. Tilley concludes by telling
 23 the board, "In follow up with the request of
 24 the board for us to strategize around seeking
 25 to clear up some of the confusion that has

Page 158

1 Q. In fact, you'd never met him?
 2 MS. BONNELL:
 3 A. No.
 4 COFFEY, Q.C.:
 5 Q. Okay. Do you know did anyone within your
 6 hearing ever say that they had spoken to Dr.
 7 Ejeckam about the '03 memo?
 8 MS. BONNELL:
 9 A. I do recall people saying that they were
 10 trying to reach Dr. Ejeckam and that they were
 11 having difficulty reaching him, around this
 12 time, I think, in particular, because I don't
 13 think--I think he had left the country at this
 14 point. I don't--I think I've said to you
 15 before, I don't know what would have
 16 transpired between Dr. Cook and Dr. Ejeckam -
 17 COFFEY, Q.C.:
 18 Q. Okay.
 19 MS. BONNELL:
 20 A. - in the lab setting prior to his leaving the
 21 organization.
 22 COFFEY, Q.C.:
 23 Q. If anything, you weren't told what it was?
 24 MS. BONNELL:
 25 A. No, no.

Page 160

1 surrounded this our communications director,
 2 Susan Bonnell, met with Bristol Communications
 3 today. They are currently working on the
 4 content of an ad for this weekend's paper.
 5 Time is going to preempt the ability to give
 6 the board an opportunity to provide input
 7 since it will need to go tomorrow. I apologize
 8 for that, I went on the basis that you would
 9 want us to get out there ASAP. They are
 10 working on an overall strategy involving other
 11 short and long-term measures."
 12 MS. BONNELL:
 13 A. That's accurate. I apologize for saying to
 14 you earlier they weren't involved, but they
 15 were, that's right. We did involve them in
 16 developing that ad that went in the weekend's
 17 paper.
 18 COFFEY, Q.C.:
 19 Q. Now, in developing that ad who drafted it?
 20 MS. BONNELL:
 21 A. I don't remember if it was drafted by Bristol
 22 or drafted by me.
 23 COFFEY, Q.C.:
 24 Q. Whichever of the two, the contents of it, was
 25 it, the contents run past anybody for

Page 161

1 accuracy?

2 MS. BONNELL:

3 A. Everybody would have seen that ad, I think,

4 before it went in the paper.

5 COFFEY, Q.C.:

6 Q. When you say everybody, you're talking who?

7 MS. BONNELL:

8 A. Mr. Tilley would have seen it, I believe Ms.

9 Predham would have seen it, Mr.--Dr. Howell

10 would have seen it, probably Ms. Pilgrim, too,

11 I'm not sure.

12 COFFEY, Q.C.:

13 Q. And just if we could, please, bring up Exhibit

14 P-0227? Here's an e-mail from yourself to Ms.

15 Mundon June 1, '07. "We're still in draft but

16 this is basically it. This is going in all

17 Transcon papers and the Telegram." And this

18 is drafted at the time. Now, the rationale

19 for running such an advertisement at this

20 point was what?

21 MS. BONNELL:

22 A. Just another opportunity to clarify some of

23 the messages that we wanted to clarify and to-

24 -I mean, the big issue was that, we felt, that

25 people were saying that, the reporters in

Page 163

1 because we mentioned the mammography and

2 breast screening up front, I think.

3 COFFEY, Q.C.:

4 Q. Yes. And but what portion of it proved

5 problematic, if any?

6 MS. BONNELL:

7 A. Sorry, I don't really understand what you're

8 asking.

9 COFFEY, Q.C.:

10 Q. Well, I'll refer you to on one of the bullets

11 you say in large print, "We have always been

12 up front and open with out patients." The

13 second-last bullet, "We informed all patients

14 and their doctors of their individual test

15 results." See that?

16 MS. BONNELL:

17 A. Yes.

18 COFFEY, Q.C.:

19 Q. Now, as June went on, did that prove

20 inaccurate?

21 MS. BONNELL:

22 A. There were some patients who were missed, yes,

23 absolutely, yes. But at -

24 COFFEY, Q.C.:

25 Q. So at this -

Page 162

1 stories were saying that people had not been

2 given their health information.

3 COFFEY, Q.C.:

4 Q. Okay.

5 MS. BONNELL:

6 A. That we never told patients anything, we

7 didn't disclose anything to patients, which we

8 did do.

9 COFFEY, Q.C.:

10 Q. Now, what, if any, portions of the ad

11 eventually proved problematic?

12 MS. BONNELL:

13 A. This is not the final version of it. Is there

14 another version?

15 COFFEY, Q.C.:

16 Q. There are a number of different -

17 MS. BONNELL:

18 A. Oh, is that right, okay.

19 COFFEY, Q.C.:

20 Q. - versions, as it were. I'll try Exhibit P-

21 0955? That's page 4, please? This is another

22 one that was--this is the one that was

23 distributed within the--from Tansy Mundon -

24 MS. BONNELL:

25 A. Yeah, this looks more like the final version

Page 164

1 MS. BONNELL:

2 A. - that point in time we certainly believed

3 that we had--you know, I believed that all

4 patients had been notified or their doctors.

5 COFFEY, Q.C.:

6 Q. And where or from whom did you first learn

7 that that might not be so?

8 MS. BONNELL:

9 A. I don't recall how that came to my attention,

10 specifically. I'm not sure who would have

11 brought that to my attention first.

12 COFFEY, Q.C.:

13 Q. Okay.

14 MS. BONNELL:

15 A. May have actually flown from media stories and

16 gone that way, too, I'm not sure.

17 COFFEY, Q.C.:

18 Q. If we could look at Exhibit, please, P-1274?

19 MS. BONNELL:

20 A. Ah, yes.

21 COFFEY, Q.C.:

22 Q. You recognize this?

23 MS. BONNELL:

24 A. I remember this, yeah.

25 COFFEY, Q.C.:

Page 165

1 Q. This is an e-mail, it's a series of e-mails of
 2 June 13th, 2007. The first of them is from
 3 Ms. Elizabeth Strange to yourself.
 4 MS. BONNELL:
 5 A. Um-hm.
 6 COFFEY, Q.C.:
 7 Q. At 8:53 a.m. sending a story from CBC News
 8 "Inadequate Response to Lab Warning,
 9 Pathologist Says." And then at 8:58 you
 10 distributed that to the executive team at
 11 Eastern Health and other individuals. And you
 12 write, "This issue is in the news again." And
 13 the issue, I take it, is ER/PR. "I listened
 14 to Vic Adophia this morning which Jeff
 15 Gilhooly. It's interesting that this is the
 16 first time, to my recollection, that I've
 17 heard a reporter admit that this review
 18 process hasn't been undertaken anywhere else
 19 in the country. That point has really been
 20 missed by the media despite our attempt to
 21 bring it to the forefront. You know, what
 22 worries me more than anything about this whole
 23 process is the implications for how the health
 24 care system operates, quality improvement,
 25 etcetera. There seems to be an impression,

Page 167

1 COFFEY, Q.C.:
 2 Q. So I take it that you were concerned that the
 3 media might begin to question the reliability
 4 of other types of laboratory tests?
 5 MS. BONNELL:
 6 A. Yes.
 7 COFFEY, Q.C.:
 8 Q. Did you have any reason to believe that such
 9 questioning might be appropriate?
 10 MS. BONNELL:
 11 A. No, I was just worried about it.
 12 COFFEY, Q.C.:
 13 Q. If we could, please, Exhibit P-1421? Now,
 14 ma'am, this is--it's entitled Eastern Health
 15 Authority, Crisis Communications briefing
 16 note. There's a heading "immediate challenge"
 17 then there's a heading "goals, target
 18 audiences, recommended immediate tactics." Do
 19 you recognize this document?
 20 It begins by saying "information on the
 21 ER/PR issue continues to be misrepresented in
 22 the media. Inaccurate coverage continues to
 23 dominate news cycles provincially and
 24 nationally" and it continues on to say "The
 25 ER/PR issue has now evolved to a broader issue

Page 166

1 certainly at CBC, anyway, that our system, if
 2 not perfect, is therefore flawed. You can be
 3 sure that they are digging now to see what
 4 other lab processes we have had, what they
 5 will call problems within the past." And then
 6 if we could, please, at 9 a.m. the same
 7 morning you distribute the same e-mail to
 8 Oscar Howell, George Tilley and Stephen Dodge
 9 saying, "I'm really worried. I think we
 10 should discuss the implications and strategize
 11 about how we can cut off the angle I'm afraid
 12 these guys are going to take." Now, ma'am,
 13 perhaps you could tell the Commissioner what
 14 angle are we talking about here?
 15 MS. BONNELL:
 16 A. Just worried that this would become more
 17 digging into every lab process that we operate
 18 and looking for other problems. Really that's
 19 all that I meant and I just wanted--I wanted
 20 to have a conversation about that.
 21 COFFEY, Q.C.:
 22 Q. Well, did you?
 23 MS. BONNELL:
 24 A. I don't recall that conversation being held,
 25 no.

Page 168

1 of public confidence in the health care
 2 system" and it goes on then at some length.
 3 The first part ends with a paragraph
 4 saying "the suggested tactics itemized below
 5 are very heavily focused on media, for the
 6 purposes of managing the crisis over the next
 7 72 hour period. However, media relations are
 8 only one small component and effectively
 9 managing any crisis and the subsequent
 10 rebuilding efforts, the bigger challenge ahead
 11 next week is fast tracking a process of
 12 managing stakeholders and quickly engaging
 13 them in a recovery strategy."
 14 MS. BONNELL:
 15 A. I believe this was prepared by Bristol.
 16 COFFEY, Q.C.:
 17 Q. As advice to Eastern Health?
 18 MS. BONNELL:
 19 A. Yes.
 20 COFFEY, Q.C.:
 21 Q. So what did you understand the process of
 22 managing stakeholders meant?
 23 MS. BONNELL:
 24 A. That's a--it's professional jargon, I guess.
 25 I've talked a lot about, you know, better

Page 169

1 management--when you talk about managing
 2 stakeholders, it's just better communications
 3 with stakeholders, setting up processes,
 4 manage processes to engage stakeholders in
 5 better communications. Finding ways to bring
 6 stakeholders in to engage them in the process
 7 in a more meaningful way than we had done in
 8 the past, in this particular issue.
 9 COFFEY, Q.C.:
 10 Q. Now, the recommended--who had requested that
 11 Bristol provide this?
 12 MS. BONNELL:
 13 A. I'm trying to remember now if it was me. I
 14 think it was.
 15 COFFEY, Q.C.:
 16 Q. Who did you pass it onto?
 17 MS. BONNELL:
 18 A. When was this, in June you said?
 19 COFFEY, Q.C.:
 20 Q. Well -
 21 MS. BONNELL:
 22 A. There's no date on it?
 23 COFFEY, Q.C.:
 24 Q. It's undated.
 25 MS. BONNELL:

Page 171

1 MS. BONNELL:
 2 A. That didn't happen.
 3 COFFEY, Q.C.:
 4 Q. Didn't happen, and why not?
 5 MS. BONNELL:
 6 A. We didn't feel it was appropriate to do that
 7 at that time.
 8 COFFEY, Q.C.:
 9 Q. And "media editorial board to be held as soon
 10 as possible, preferably tomorrow morning via
 11 conference call for all papers outside St.
 12 John's."
 13 MS. BONNELL:
 14 A. That didn't occur.
 15 COFFEY, Q.C.:
 16 Q. Why not?
 17 MS. BONNELL:
 18 A. I don't recall why that didn't occur at that
 19 time. I think we may have been sidetracked by
 20 Burin Radiology in the midst of all this too.
 21 COFFEY, Q.C.:
 22 Q. "Schedule a media briefing with the host of
 23 the three open-line programs, Randy Simms,
 24 Bill Rowe and Linda Swain."
 25 MS. BONNELL:

Page 170

1 A. It's undated.
 2 COFFEY, Q.C.:
 3 Q. It talks about the crisis of the next 72-hour
 4 period.
 5 MS. BONNELL:
 6 A. Right, yeah.
 7 COFFEY, Q.C.:
 8 Q. Full page ads this weekend in The Telegram.
 9 MS. BONNELL:
 10 A. Right.
 11 COFFEY, Q.C.:
 12 Q. The first weekend of June, I take it.
 13 MS. BONNELL:
 14 A. That's right, yeah. So it would have gone to
 15 members of the executive involved in the
 16 issue. So that would have included Mr. Tilley
 17 at that point, Dr. Howell, probably Mr. Dodge,
 18 myself, perhaps Ms. Pilgrim. I'm not sure if
 19 her involvement had started at that point.
 20 COFFEY, Q.C.:
 21 Q. And question "meeting with CBC's regional
 22 producers and executive producers of TV and
 23 radio to be held tomorrow to discuss the
 24 ramifications of media inaccuracies." Did
 25 that -

Page 172

1 A. That didn't occur.
 2 COFFEY, Q.C.:
 3 Q. Why not?
 4 MS. BONNELL:
 5 A. Again, I don't recall why that didn't happen
 6 at that time.
 7 COFFEY, Q.C.:
 8 Q. "Focus on immediate correction of inaccuracies
 9 with individual journalists," and they name--
 10 they're named here. Did that happen?
 11 MS. BONNELL:
 12 A. We did send a letter to The Packet and The
 13 Globe, and I'm trying to remember what The
 14 Herald issue was. Oh, I think that they
 15 reported that it was breast screening, which
 16 we corrected, and then they printed a thing
 17 for us, a retraction.
 18 COFFEY, Q.C.:
 19 Q. And then next bullet, "immediate search and
 20 analysis of media national coverage over the
 21 last three-week period to help identify other
 22 media coverages which may need to be
 23 challenged." Was that done?
 24 MS. BONNELL:
 25 A. Yes.

Page 173

1 COFFEY, Q.C.:

2 Q. Was there any such media coverage identified?

3 MS. BONNELL:

4 A. No, I don't recall that there was.

5 COFFEY, Q.C.:

6 Q. "Book live appearance on CBC Radio's Crosstalk

7 for early next week." Did that happen?

8 MS. BONNELL:

9 A. I don't think it did.

10 COFFEY, Q.C.:

11 Q. Do you recall why not?

12 MS. BONNELL:

13 A. No.

14 COFFEY, Q.C.:

15 Q. "Call in to Open Line."

16 MS. BONNELL:

17 A. That didn't happen. I wouldn't have had

18 agreement from executive to do that.

19 COFFEY, Q.C.:

20 Q. Why is that?

21 MS. BONNELL:

22 A. They just wouldn't do it.

23 COFFEY, Q.C.:

24 Q. And finally "find immediate opportunities to

25 create positive associations, for example,

Page 175

1 MS. BONNELL:

2 A. I don't recall the exact order of it, but I

3 certainly did inform Ms. Mundon and then there

4 was some confusion about it going to Carolyn

5 or Ms. Mundon. I had talked to both of them

6 about the fact that that story would be

7 running and that Dr. Laing was doing that. I

8 don't recall informing the Department prior to

9 calling The Independent back. We might have

10 been in the midst of--you know, it's never

11 just one phone call. It would have been

12 multiple phone calls.

13 COFFEY, Q.C.:

14 Q. So I take it that--well, from the perspective,

15 you weren't seeking their permission?

16 MS. BONNELL:

17 A. No, certainly not.

18 COFFEY, Q.C.:

19 Q. Because you'd remember whether or not you did

20 that.

21 MS. BONNELL:

22 A. No, no.

23 COFFEY, Q.C.:

24 Q. Okay. That's one thing I did want to clarify.

25 Now they're the questions that I have,

Page 174

1 appearance at the Janeway Telethon." Did that

2 happen?

3 MS. BONNELL:

4 A. Very difficult to counteract the level of

5 negativity in the media at that point with

6 positive things. I mean, Mr. Tilley did go to

7 the Janeway Telethon, but that was a scheduled

8 thing that would have occurred anyway. We

9 didn't actively seek positive associations at

10 that time.

11 COFFEY, Q.C.:

12 Q. Just a couple of things I had meant to ask and

13 may not have. I just want to take you back to

14 September 30th, 2005, which is the day the

15 story--The Independent called. Do you recall

16 whether or not you discussed with the

17 Department of Health that day whether or not

18 you should give the story to The Independent?

19 MS. BONNELL:

20 A. No, I didn't.

21 COFFEY, Q.C.:

22 Q. And I ask that because Ms. Mundon's e-mail,

23 one of her e-mails says that--to Ms. Chaplin

24 says that Ms. Mundon had talked to you before

25 you called The Independent back.

Page 176

1 Commissioner. Thank you. I'm sorry I've gone

2 longer than I anticipated, but there is,

3 Commissioner, the material that related to Ms.

4 Bonnell that came to us by e-mail yesterday

5 evening. I've had an opportunity to look at

6 some of it; some of it, not yet. In any case,

7 the material has not been distributed to the

8 other lawyers in the room, and with that in

9 mind, I just wanted to let you know that if

10 upon review of it, it becomes necessary--it

11 may become necessary to ask that the witness

12 come back to be questioned about it. I've

13 just not had the opportunity, in the meantime,

14 to -

15 THE COMMISSIONER:

16 Q. To review it.

17 COFFEY, Q.C.:

18 Q. - to review it, and in any case -

19 THE COMMISSIONER:

20 Q. Well, I suppose there's also the possibility

21 that other counsel -

22 COFFEY, Q.C.:

23 Q. Yes.

24 THE COMMISSIONER:

25 Q. Even if you don't feel that it's necessary to

1 recall the witness on that basis, other
 2 counsel may view that there's something in it
 3 that they want to question the witness on.
 4 COFFEY, Q.C.:
 5 Q. Just so, with that in mind, they're the
 6 questions I have.
 7 THE COMMISSIONER:
 8 Q. With that caveat, as it were.
 9 COFFEY, Q.C.:
 10 Q. With that caveat.
 11 THE COMMISSIONER:
 12 Q. All right. We might as well take the luncheon
 13 break. Five after two. Thank you.
 14 (LUNCH BREAK)
 15 THE COMMISSIONER:
 16 Q. Mr. Pritchard?
 17 CROSBIE, Q.C.:
 18 Q. I believe there's agreement that I would go
 19 first.
 20 THE COMMISSIONER:
 21 Q. Oh, well, if there's agreement that you would
 22 go first, in that case, Mr. Crosbie.
 23 MS. SUSAN BONNELL, EXAMINATION BY CHESLEY CROSBIE, Q.C.
 24 CROSBIE, Q.C.:
 25 Q. Thank you. I'm thinking Mr. Coffey's got a

1 groove worn in this mat, Commissioner. When
 2 you put in for the extension, I hope you
 3 looked for a budget -
 4 THE COMMISSIONER:
 5 Q. For another mat.
 6 CROSBIE, Q.C.:
 7 Q. - item for another mat. But I'm sure we'll
 8 manage. The first item I'd like to look at
 9 with you, Ms. Bonnell, is--it's at my Tab 6,
 10 the document number is P-0308, and this is--
 11 it's an e-mail from Heather Predham, October
 12 18th 2005, subject is patient letter, and it's
 13 sent to you, as well as Ms. Pilgrim and Dr.
 14 Williams, and you can see that?
 15 MS. BONNELL:
 16 A. Yes.
 17 CROSBIE, Q.C.:
 18 Q. The item I'm interested in is the third
 19 paragraph from the bottom where it says
 20 "finally"
 21 MS. BONNELL:
 22 A. Um-hm.
 23 CROSBIE, Q.C.:
 24 Q. And you'll see there, "finally, I think we
 25 should be aware that we will not be able to

1 notify everyone" and then it's signed off,
 2 Heather.
 3 MS. BONNELL:
 4 A. Um-hm.
 5 CROSBIE, Q.C.:
 6 Q. Do you remember this e-mail?
 7 MS. BONNELL:
 8 A. Yes, I do, yes.
 9 CROSBIE, Q.C.:
 10 Q. Does that permit an inference that Eastern
 11 Health formed the perception or the belief
 12 early in the game, in other words in October
 13 2005, that in fact they would not be able to
 14 notify everyone?
 15 MS. BONNELL:
 16 A. That's certainly what Ms. Predham is saying
 17 there. I guess she's indicating that she has
 18 some concerns. She says "several on the list
 19 have moved and we have no other contact
 20 information." So I guess her concern was
 21 being able to reach individuals that we had no
 22 contact information for, individuals who had
 23 left the province or were unavailable to be
 24 reached.
 25 CROSBIE, Q.C.:

1 Q. Indeed the statement appears there, "we will
 2 not be able to notify everyone."
 3 MS. BONNELL:
 4 A. Several on the list have moved, that's right.
 5 CROSBIE, Q.C.:
 6 Q. And yet, you'll forgive me if I bring to your
 7 attention the almost countless times in which
 8 Eastern Health said "everyone has been
 9 notified."
 10 MS. BONNELL:
 11 A. It was my belief that everybody had been
 12 notified.
 13 CROSBIE, Q.C.:
 14 Q. I see. And we next turn to--it's the
 15 administrative policy of--it's P-0056 is the
 16 document number, and I'm interested in page
 17 18, and what we see here is--well, it's called
 18 an administrative policy manual. This has
 19 already been entered as an exhibit. The
 20 section is legal ethics. The title is
 21 guidelines on disclosure of adverse events.
 22 The issuing authority is said to be the VP of
 23 Medical Services, and that looks like a
 24 signature for, I guess it's Dr. Williams. Is
 25 that a signature you recognize?

Page 181

1 MS. BONNELL:
 2 A. I don't actually recognize it.
 3 CROSBIE, Q.C.:
 4 Q. Somebody seems to have signed it, in any
 5 event.
 6 MS. BONNELL:
 7 A. Um-hm.
 8 CROSBIE, Q.C.:
 9 Q. Underneath VP Medical Services, we can see
 10 that much anyway.
 11 MS. BONNELL:
 12 A. Yes.
 13 CROSBIE, Q.C.:
 14 Q. And the date of the signature appears to be
 15 August 1st, 2005.
 16 MS. BONNELL:
 17 A. Yes.
 18 CROSBIE, Q.C.:
 19 Q. Although the date typed in is 2004/09/09, in
 20 other words September 09. But it would seem
 21 that this was in effect at the time of--well,
 22 at least from August 1st, 2005, if not before
 23 that.
 24 MS. BONNELL:
 25 A. There were a number of policies and I think it

Page 183

1 can't quite make out. Do you agree with that?
 2 MS. BONNELL:
 3 A. Yes.
 4 CROSBIE, Q.C.:
 5 Q. Well, you can tell me if you think any of this
 6 policy here is unreasonable as we go through
 7 it or if there's anything in particular that
 8 you disagree with, let me know, okay. Let me
 9 ask you, in your involvement with this matter,
 10 from the summer or early summer, late spring,
 11 however you want to say it, 2005 right
 12 through to after certification and the
 13 appointment of--or the announcement of the
 14 Commission of Inquiry, did you ever check the
 15 policies that might apply that any of the
 16 former entities that got merged into Eastern
 17 Health had relating to how to handle
 18 communication and disclosure?
 19 MS. BONNELL:
 20 A. No, I wouldn't have, in terms of disclosure
 21 with patients and communication with patients
 22 because that wouldn't have been the
 23 responsibility of my department, the direct
 24 contact with patients per se. We use
 25 communication in both senses, you know. We're

Page 182

1 would be best to ask someone from Quality and
 2 Risk this, on this particular policy, but it's
 3 my understanding that there were a number of
 4 policies that were in draft form and were not
 5 finalized until later on. So I don't know if
 6 the organization would have been following
 7 policies from former health authorities that
 8 governed or--and in this case, you can see
 9 this one is the Health Care Corporation of St.
 10 John's, right, as opposed to Eastern Health.
 11 By August 1st, 2005, it would have been
 12 Eastern Health. So I'm not sure.
 13 CROSBIE, Q.C.:
 14 Q. Well, we've heard from other people earlier
 15 that the idea, I guess, was that certain--to
 16 be guided at least by policies in effect by
 17 other legal entities before the merger, if I
 18 can call it that.
 19 MS. BONNELL:
 20 A. Yes, that's right.
 21 CROSBIE, Q.C.:
 22 Q. And as well, in this case, it seems to have
 23 been consciously acknowledged as being
 24 something that should be followed on August
 25 1st, 2005, by somebody whose signature we

Page 184

1 talking about communication to patients and
 2 we're talking about communications at large,
 3 but certainly the issue of dealing with the
 4 disclosure of an adverse event, there are
 5 other adverse events that happen within the
 6 organization and the communications department
 7 is uninvolved with those at all. It's only
 8 because of the nature of this particular event
 9 that the communications department was
 10 involved.
 11 CROSBIE, Q.C.:
 12 Q. In your employment prior to this issue coming
 13 to your attention in 2005, did you ever have
 14 occasion to review any policy of your employer
 15 having to do with disclosure?
 16 MS. BONNELL:
 17 A. I can't recall a specific event that would
 18 have caused me to look that up.
 19 CROSBIE, Q.C.:
 20 Q. And you told us your view would be that
 21 policies on disclosure would be pertinent to
 22 somebody else's job, but not yours?
 23 MS. BONNELL:
 24 A. Insofar as contact with patients in an adverse
 25 event, yes, that's right.

Page 185

1 CROSBIE, Q.C.:

2 Q. And in the context of the ER/PR testing issue,

3 who would that be who would be responsible to

4 concern themselves with compliance with

5 disclosure policies?

6 MS. BONNELL:

7 A. It would be the oncologists and pathologists

8 and the teams within Cancer Care and within

9 Laboratory Medicine who would be involved in

10 disclosure of an event to a patient. It could

11 also be--you know, in the case of ER/PR, it

12 was a little more complicated in that it was--

13 if you look at an issue like an individual

14 having an adverse event in a surgery, you

15 know, it's the surgical team who are involved

16 in the adverse event who'd also be involved in

17 the disclosure of that to the individual

18 involved. This was complicated in that it was

19 there were multiple parties involved, I guess.

20 But the responsibility for disclosure to

21 patients would still rest with those

22 individuals, and my understanding is that the

23 most responsible physician is the one that

24 would be involved in making that sort of

25 disclosure.

Page 187

1 there is one in place for Eastern Health, but

2 it's certainly how we felt, yes.

3 CROSBIE, Q.C.:

4 Q. I don't know of any more recent one than the

5 one we're looking at now.

6 MS. BONNELL:

7 A. Okay.

8 CROSBIE, Q.C.:

9 Q. And it goes on to say "an adverse event is

10 defined as: 1. an unexpected and undesired

11 incident"--anyway, you can read through that,

12 but I'd suggest to you that there's probably

13 not much doubt that ER/PR, as an issue, comes

14 under the category of adverse event.

15 MS. BONNELL:

16 A. Um-hm.

17 CROSBIE, Q.C.:

18 Q. And it goes on to say, at the bottom of that

19 section dealing with policy, "all physicians,

20 nurses, allied health professionals, students

21 and support staff are expected to be prompt

22 and diligent in responding appropriately upon

23 discovery of an adverse event."

24 MS. BONNELL:

25 A. Um-hm.

Page 186

1 CROSBIE, Q.C.:

2 Q. Or maybe other caregiver position, conceivably

3 somebody else, maybe conceivably nursing, but

4 -

5 MS. BONNELL:

6 A. Yes.

7 CROSBIE, Q.C.:

8 Q. - your first reaction is most responsible

9 physician?

10 MS. BONNELL:

11 A. Most responsible physician, yes, but you're

12 right, if the event were having to do with a

13 psychologist or some other professional

14 practice, then that individual would be

15 involved.

16 CROSBIE, Q.C.:

17 Q. I'm just scrolling down a little here. So it

18 says here, "the corporation is committed to

19 candid and timely disclosure of adverse

20 events, particularly those that may cause risk

21 to the patient," and there's no question that

22 that's the policy of Eastern Health, I guess?

23 MS. BONNELL:

24 A. That was certainly--yes, I mean, I haven't

25 read the most recent Eastern Health policy, if

Page 188

1 CROSBIE, Q.C.:

2 Q. And you'd assume that to be--or you accept

3 that as a policy, I guess.

4 MS. BONNELL:

5 A. Yes.

6 CROSBIE, Q.C.:

7 Q. And it goes on to outline a procedure. Item

8 number two on that page is "to initiate an

9 occurrence report." To your knowledge, was an

10 occurrence report ever initiated here?

11 MS. BONNELL:

12 A. I wouldn't have any knowledge of that. To my

13 knowledge, I don't know.

14 CROSBIE, Q.C.:

15 Q. Then going on down to item six under

16 disclosure which says "arrangements should be

17 made as soon as possible to meet with the

18 patient to disclose what is known about the

19 event; and (c) take the lead in disclosure.

20 Don't wait for the patient to ask," and you

21 can see that, right?

22 MS. BONNELL:

23 A. Yes.

24 CROSBIE, Q.C.:

25 Q. G says "document the discussion in the

Page 189

1 patient's health record." I'm sorry, I
 2 neglected to move it down. And you can see
 3 that there, item G?
 4 MS. BONNELL:
 5 A. Um-hm.
 6 CROSBIE, Q.C.:
 7 Q. Thank you. It reiterates that, paragraph
 8 eight, where it says "documentation of
 9 disclosure must" and the word "must" is both
 10 in bold and italics, "be placed in patient's
 11 health record." Do you know if that occurred
 12 in this instance?
 13 MS. BONNELL:
 14 A. I don't, sir, because I'm not a clinician and
 15 I wouldn't be part of the clinical care. I
 16 mean, I've never seen a patient health record.
 17 CROSBIE, Q.C.:
 18 Q. Very good, and you note there, it says, at
 19 item K, "apologies are appropriate"?
 20 MS. BONNELL:
 21 A. Yes.
 22 CROSBIE, Q.C.:
 23 Q. So it would seem that from what we can tell
 24 looking at this, there's a policy in favour of
 25 encouraging apologies?

Page 191

1 MS. BONNELL:
 2 A. Yeah, I don't -
 3 CROSBIE, Q.C.:
 4 Q. If you don't feel qualified to answer that,
 5 then that's fine.
 6 MS. BONNELL:
 7 A. No, I don't know what the policy is in that
 8 regard when--or what the practice is in that
 9 regard when policies are not followed for some
 10 specific reason or if there were issues here
 11 that weren't followed.
 12 CROSBIE, Q.C.:
 13 Q. Could I ask our Registrar to take us to
 14 document P-0779? And what we should be seeing
 15 here is May 2006, an effort is being made to
 16 organize an ethics consult and the initiating
 17 part appears here where I have the cursor,
 18 "Hi. I've been asked to organize an ethics
 19 consult."
 20 MS. BONNELL:
 21 A. Yes.
 22 CROSBIE, Q.C.:
 23 Q. And it involves deceased patients or families
 24 of deceased patients, and let's see, I don't
 25 see in here a mention of Mr. Boone. It's not

Page 190

1 MS. BONNELL:
 2 A. Yes.
 3 CROSBIE, Q.C.:
 4 Q. And you're saying your knowledge of these
 5 policies and the documentation that may
 6 surround it, including documentation of
 7 disclosure on patient records, you'd have
 8 limited knowledge of that?
 9 MS. BONNELL:
 10 A. I would have no knowledge of it, you know,
 11 other than what I may be told in a meeting
 12 about disclosures, but I'm not involved in the
 13 clinical care team or clinical provision of
 14 care, so no, I'm not aware of that.
 15 CROSBIE, Q.C.:
 16 Q. If there is a decision by the appropriate
 17 authorities within the Corporation not to
 18 follow the governing policy, would you expect
 19 that to be noted down in writing somewhere
 20 with reasons for that decision?
 21 MS. BONNELL:
 22 A. I really feel that I'm outside of my scope,
 23 Mr. Crosbie, because I -
 24 CROSBIE, Q.C.:
 25 Q. Well, by all means, don't go there.

Page 192

1 copied to Mr. Boone, as far as I can tell.
 2 It's not addressed to Mr. Boone. Would you
 3 agree with that?
 4 MS. BONNELL:
 5 A. Yes.
 6 CROSBIE, Q.C.:
 7 Q. Can we next see P-0481? Maybe it's page two
 8 I'm looking for. Thank you. And you see
 9 where it lists who's present?
 10 MS. BONNELL:
 11 A. Yes.
 12 CROSBIE, Q.C.:
 13 Q. Now we have Mr. Boone appearing.
 14 MS. BONNELL:
 15 A. Yes.
 16 CROSBIE, Q.C.:
 17 Q. He's stated to be lawyer there, right?
 18 MS. BONNELL:
 19 A. Yes.
 20 CROSBIE, Q.C.:
 21 Q. And we can all read who else was present, and
 22 that's the result of the consult, as we can
 23 all see, I guess. So my question for you is,
 24 it's quite obvious from the record that an
 25 ethics consult was organized and did take

Page 193

1 place in May 2006 and that a key person in
 2 that was Mr. Rick Singleton, director, and I
 3 believe his title appears on page--the next
 4 page.
 5 MS. BONNELL:
 6 A. He's the director of the pastoral care
 7 department. He was facilitating this session,
 8 I guess.
 9 CROSBIE, Q.C.:
 10 Q. Okay. I think his--yeah, I think his title is
 11 actually director of pastoral care and ethics.
 12 MS. BONNELL:
 13 A. Ethics, that's right.
 14 CROSBIE, Q.C.:
 15 Q. Would that be right?
 16 MS. BONNELL:
 17 A. Um-hm.
 18 CROSBIE, Q.C.:
 19 Q. Or possibly pastoral care and medical ethics,
 20 one or the other. It doesn't seem to appear
 21 right here. But in any event, we can see
 22 there was an ethics consult. Did the subject
 23 of obtaining an ethics consult outside of this
 24 one here that seemed to be responsive to a
 25 concern about how to go about and whether to

Page 195

1 MS. BONNELL:
 2 A. Yes.
 3 CROSBIE, Q.C.:
 4 Q. You knew that position existed?
 5 MS. BONNELL:
 6 A. Yes.
 7 CROSBIE, Q.C.:
 8 Q. And you knew probably the identity of the
 9 person who occupied the position?
 10 MS. BONNELL:
 11 A. Certainly.
 12 CROSBIE, Q.C.:
 13 Q. It didn't arise in your mind as being a good
 14 idea to pursue involving the director of
 15 medical ethics in your formulation of a plan
 16 for communications?
 17 MS. BONNELL:
 18 A. No, it didn't.
 19 CROSBIE, Q.C.:
 20 Q. Can you explain why that would be?
 21 MS. BONNELL:
 22 A. I guess I've tried to explain to you that I
 23 guess there's a division of responsibility
 24 within the organization in terms of although
 25 we talk about communication, communication,

Page 194

1 go about informing families of deceased
 2 patients, did the subject of an ethics consult
 3 and how to handle disclosure get raised in
 4 your presence or in anything that you read
 5 prior to this?
 6 MS. BONNELL:
 7 A. No.
 8 CROSBIE, Q.C.:
 9 Q. Did it arise in your mind as something that
 10 would be a good idea?
 11 MS. BONNELL:
 12 A. No, it didn't.
 13 CROSBIE, Q.C.:
 14 Q. This ethics consult you see in front of you
 15 here involved, we could call it, disclosure, I
 16 suppose if you wish, you could use the word
 17 communication. Disclosure and communication
 18 has an overlap, doesn't it?
 19 MS. BONNELL:
 20 A. Yes. Again, you know, patient-specific
 21 disclosure, yes, and communication, yes. I
 22 wasn't involved in this ethics consult.
 23 CROSBIE, Q.C.:
 24 Q. You knew Mr. Singleton or Dr. Singleton, I
 25 guess he is?

Page 196

1 communication, you know, the issue of patient
 2 communication, patient notification, was not
 3 an area of responsibility for our department.
 4 So dealing with the patients directly, that
 5 responsibility fell outside of my department
 6 and my responsibility would have been the side
 7 of the issue having to do with public
 8 discussion, public notification. Certainly
 9 patients are part of the public, I would agree
 10 with you that, you know, the larger patient
 11 group is also part of the public group, but in
 12 terms of direct contact with patients, I'm not
 13 an expert in that area and there are others
 14 who are. And so we--if there was an issue of
 15 how an issue may get reaction in the media,
 16 then that may be likely to come to me and be
 17 talked about with me, but in terms of, I mean,
 18 there are hundreds of disclosures that happen
 19 on a daily basis of which I know nothing, not
 20 involved -
 21 CROSBIE, Q.C.:
 22 Q. But, Ms. Bonnell -
 23 MS. BONNELL:
 24 A. - with individual patients.
 25 CROSBIE, Q.C.:

Page 197

1 Q. What about the letter on which you worked
 2 closely that we've seen -
 3 MS. BONNELL:
 4 A. We drafted, you're right.
 5 CROSBIE, Q.C.:
 6 Q. - half a dozen times.
 7 MS. BONNELL:
 8 A. Um-hm.
 9 CROSBIE, Q.C.:
 10 Q. As Ms. Coffey has been taking you through.
 11 Now, you were closely involved in drafting
 12 that letter, I believe?
 13 MS. BONNELL:
 14 A. I was involved in drafting it so that the
 15 quality staff would have something that they
 16 could then work with, yes, that's correct,
 17 that that was something that was asked for us
 18 to do. ER/PR is a different issue than -
 19 CROSBIE, Q.C.:
 20 Q. Okay. But this was -
 21 MS. BONNELL:
 22 A. - other disclosures.
 23 CROSBIE, Q.C.:
 24 Q. - a letter on ER/PR going to go directly to
 25 patients, right?

Page 199

1 original draft that we didn't bear much
 2 similarity to what was eventually drafted,
 3 although none were sent.
 4 CROSBIE, Q.C.:
 5 Q. Can you say as a matter of personal knowledge
 6 whether physicians ever looked at the letter
 7 and approved it?
 8 MS. BONNELL:
 9 A. I didn't certainly send it to any physicians
 10 to approve.
 11 CROSBIE, Q.C.:
 12 Q. So you don't have another basis on which to
 13 say physicians approved that draft letter?
 14 MS. BONNELL:
 15 A. No, other than the fact that a lot of these
 16 things were forwarded. If you look at the e-
 17 mails, you'll see that they're forwarded to
 18 Doctors Laing and others and the letter was
 19 part of those forwardings. So whether they
 20 read the letters or not, I don't know, and I
 21 don't know if they would have provided any
 22 input to Heather or the quality staff, that
 23 you'd have to ask of them.
 24 CROSBIE, Q.C.:
 25 Q. You can't say whether there was an actual

Page 198

1 MS. BONNELL:
 2 A. Yes.
 3 CROSBIE, Q.C.:
 4 Q. And you were closely involved in the drafting
 5 of it?
 6 MS. BONNELL:
 7 A. Yes.
 8 CROSBIE, Q.C.:
 9 Q. Who else was?
 10 MS. BONNELL:
 11 A. The quality staff and others, as well who -
 12 CROSBIE, Q.C.:
 13 Q. That's Ms. Predham?
 14 MS. BONNELL:
 15 A. Yes.
 16 CROSBIE, Q.C.:
 17 Q. And who else?
 18 MS. BONNELL:
 19 A. And Ms. Parsons. And I don't know who they
 20 would have consulted with in the quality
 21 department, you'd have to ask them. And I
 22 believe that the letter was also passed by
 23 some physicians, as well, later on. But
 24 certainly, it was the quality department who
 25 did most of the work on the letter. The

Page 200

1 formal request made to any physician, here's
 2 the letter we propose to send out, sign off on
 3 it?
 4 MS. BONNELL:
 5 A. I certainly didn't make that request.
 6 CROSBIE, Q.C.:
 7 Q. It's been my experience doctors aren't real
 8 good at reading e-mails, but I don't know,
 9 your experience may be different. Now, you
 10 always thought that a letter would be an
 11 appropriate communications tool vis-a-vis
 12 patients?
 13 MS. BONNELL:
 14 A. Yes.
 15 CROSBIE, Q.C.:
 16 Q. And you told us that recently while you've
 17 been giving evidence here?
 18 MS. BONNELL:
 19 A. Yes.
 20 CROSBIE, Q.C.:
 21 Q. And you were aware that the minister of health
 22 was in favour of a letter going to members of
 23 the public, or at least the patients, I should
 24 say?
 25 MS. BONNELL:

Page 201

1 A. Yes.
 2 CROSBIE, Q.C.:
 3 Q. And it seems that the letter didn't go out, at
 4 least not in an of these early months?
 5 MS. BONNELL:
 6 A. No.
 7 CROSBIE, Q.C.:
 8 Q. Through, do I understand, some kind of
 9 oversight?
 10 MS. BONNELL:
 11 A. I don't know if it was oversight. There was
 12 discussion again of the letter in October of
 13 2005, at which point a decision was made to
 14 make phone calls to patients, to contact them
 15 via phone. I still think the letter would
 16 have been helpful.
 17 CROSBIE, Q.C.:
 18 Q. And you were always in favour of that?
 19 MS. BONNELL:
 20 A. Yes.
 21 CROSBIE, Q.C.:
 22 Q. But you can't say who, exactly, made a
 23 decision not to go ahead with the letter?
 24 MS. BONNELL:
 25 A. There wasn't any one individual who said, "We

Page 203

1 redacted, Commissioner, but on what we have in
 2 front of us on the screen, they are.
 3 COMMISSIONER:
 4 Q. Mr. Simmons, can you assist?
 5 MR. SIMMONS:
 6 Q. Commissioner, I had understood that those
 7 comments were all to be redacted prior to
 8 distribution. Now, I mean, I have them here
 9 to -
 10 CROSBIE, Q.C.:
 11 Q. I have an official exhibit with the number
 12 appearing on it the way it always does when
 13 they're sent out, but I don't have a big
 14 problem here, if someone thinks that this
 15 should not be referred to.
 16 COMMISSIONER:
 17 Q. I'm presuming that there was an agreement that
 18 this was considered to be confidential
 19 information related to this individual and
 20 didn't necessarily assist, but let's make sure
 21 that's been the--it's Exhibit 1508?
 22 MR. SIMMONS:
 23 Q. Commissioner, I don't suppose it's a product
 24 of this being an electronic process of putting
 25 the dashes on, whatever the process of

Page 202

1 will not go forward with the letter" to my
 2 knowledge, anyway. It certainly was never
 3 expressed to me that somebody said, "We are
 4 not going to send this letter.", no. You're
 5 right.
 6 CROSBIE, Q.C.:
 7 Q. So someone might have taken that decision and
 8 you not be aware of the decision and who took
 9 it?
 10 MS. BONNELL:
 11 A. Yes, that's possible.
 12 CROSBIE, Q.C.:
 13 Q. The other explanation is it may have just
 14 gotten lost in the swirl of events?
 15 MS. BONNELL:
 16 A. That's also possible, but I'd be supposing.
 17 CROSBIE, Q.C.:
 18 Q. Can I ask the Registrar to take us to Exhibit
 19 1508? Page 3 of that, please? This, Ms.
 20 Bonnell, is your interim performance appraisal
 21 dated October 12, 2007. And on page 3--it's
 22 overall complimentary, by the way. I think we
 23 can all see and congratulate you on that. On
 24 page 3 the remark appears, I see that the--
 25 what I have here is the comments are not

Page 204

1 printing might have -
 2 COMMISSIONER:
 3 Q. I don't know. But your understanding, Mr.
 4 Simmons, is it was agreed that it be redacted?
 5 MR. SIMMONS:
 6 Q. Yes, Commissioner.
 7 COMMISSIONER:
 8 Q. All right.
 9 CROSBIE, Q.C.:
 10 Q. I have no problem with that.
 11 COMMISSIONER:
 12 Q. Could you move on to another question and
 13 we'll just double check that?
 14 CROSBIE, Q.C.:
 15 Q. No, no, it's far from essential, I'll pass on
 16 that.
 17 COMMISSIONER:
 18 Q. All right, thank you, Mr. Crosbie.
 19 CROSBIE, Q.C.:
 20 Q. In which case can we go to Exhibit P-0304? We
 21 spent some time last day contemplating this
 22 memo, I think.
 23 MS. BONNELL:
 24 A. Yes. And I did indicate to Mr. Coffey that
 25 I've always considered the July 21st memo to

Page 205

1 be a draft memo and that the 22nd, which was a
 2 revised memo.
 3 CROSBIE, Q.C.:
 4 Q. I understand. And you also explained that it
 5 was done in haste?
 6 MS. BONNELL:
 7 A. Yes.
 8 CROSBIE, Q.C.:
 9 Q. And, yes. So we can certainly look at this
 10 together with the memo from a day later which,
 11 well, it's under the same exhibit number, it
 12 just appears there as page 3. We can easily
 13 go back and forth if you wish. Anyway, I'm
 14 going to put it to you that among all the
 15 documents that I'm aware of, and I may not be
 16 aware of all of them because there's an awful
 17 lot, but I haven't seen one that would qualify
 18 as Eastern Health's internal policy document
 19 or strategy document on how to deal with
 20 communications about a crisis outside of this
 21 and the document that comes a day later from
 22 you.
 23 MS. BONNELL:
 24 A. Yes.
 25 CROSBIE, Q.C.:

Page 207

1 was one moment, one day in time. The second
 2 memo is a little--there's more information
 3 that's expressed in the second memo than
 4 certainly in this first one, which was written
 5 with very little editing of thought, even, it
 6 was just almost like musings written to Mr.
 7 Tilley on the 21st.
 8 CROSBIE, Q.C.:
 9 Q. I understand your evidence from prior that
 10 there was no, you know, formal proper
 11 communication strategy in existence?
 12 MS. BONNELL:
 13 A. Um-hm.
 14 CROSBIE, Q.C.:
 15 Q. In the absence of that I'm saying this is all
 16 we have to fall back on?
 17 MS. BONNELL:
 18 A. Yes.
 19 CROSBIE, Q.C.:
 20 Q. This is what the organization fell back on?
 21 MS. BONNELL:
 22 A. Yes, from a public disclosure perspective.
 23 CROSBIE, Q.C.:
 24 Q. Did Mr. Tilley indicate in writing, first of
 25 all, that he disagreed with any of what you

Page 206

1 Q. Which this being composed July 21st and then I
 2 guess a more final or tidied up version on
 3 July 22nd?
 4 MS. BONNELL:
 5 A. Yes.
 6 CROSBIE, Q.C.:
 7 Q. So I'm going to put it to you that this
 8 functionally was the distillation of Eastern
 9 Health's policy or strategy on how to deal
 10 with communications with a crisis.
 11 MS. BONNELL:
 12 A. I would disagree with you, Mr. Crosbie. It's
 13 a memo from me to Mr. Tilley that he asked me
 14 to write following a meeting. There is no
 15 crisis communications plan for the
 16 organization and there is no formal strategy
 17 for the dealing with ER/PR which I talked
 18 about with Mr. Coffey yesterday, as well, that
 19 was--that should have been done and was not
 20 done. And you know, the reflections in this
 21 memo are reflections of where we were at this
 22 particular moment in time. We had just on the
 23 21st been provided with some information that
 24 lead us to believe that the issue was not as
 25 great as we later believed that it was. It

Page 208

1 put in either this one or the one that appears
 2 at page 3 and 4 of the same exhibit number?
 3 MS. BONNELL:
 4 A. He certainly didn't put anything in writing to
 5 me, but we did have a conversation about this
 6 memo and then the revised version of this
 7 memo, it was my understanding that Mr. Tilley
 8 was in agreement with me or understood the
 9 principles that were being outlines as a
 10 possible approach at this point in time.
 11 Remembering, of course, that we were still
 12 considering doing the retesting on our
 13 internal systems and all of those things at
 14 this point in time.
 15 CROSBIE, Q.C.:
 16 Q. So the second document or the July 22nd memo?
 17 MS. BONNELL:
 18 A. Yes.
 19 CROSBIE, Q.C.:
 20 Q. That was accepted by Mr. Tilley as a working
 21 document on how to handle the situation?
 22 MS. BONNELL:
 23 A. Yes, at this point, yes.
 24 CROSBIE, Q.C.:
 25 Q. Well, one of the things that changed between

Page 209

1 the two is the first bulleted paragraph.
 2 MS. BONNELL:
 3 A. Um-hm.
 4 CROSBIE, Q.C.:
 5 Q. And there's a statement in there that I've had
 6 to puzzle over it, quite frankly, and possibly
 7 that's the reason you deleted it, but I'm
 8 going to read it. "I'm no convinced that we
 9 can serve the greater good," this is you
 10 speaking in the memo, "and still maintain the
 11 reputation of the lab which, in my opinion, is
 12 in the best interests of the public to
 13 maintain." And what I take from that and the
 14 rest of the paragraph is that there was a
 15 choice that the organization had to make
 16 between maintaining the reputation of the lab
 17 for, I suppose, competence, on the one hand,
 18 and something you referred to as the greater
 19 good on the other hand, or maybe it's the same
 20 thing as maintaining the reputation of the
 21 lab. What did you mean by that, was that the
 22 greater good, maintaining the reputation of
 23 the lab?
 24 MS. BONNELL:
 25 A. I think it's in the best interest of the

Page 211

1 particular point in time, I'm not sure what's
 2 in the best interest and I don't think I was
 3 ever saying--I don't think anybody ever
 4 suggested that we would never talk about this.
 5 I mean, the opportunity to do that was long
 6 past, to say if this is about the reputation
 7 of the lab and if our primary goal here was in
 8 maintaining the reputation of the lab, then
 9 the actions that we took subsequent to that,
 10 you know, take that option away. I mean, it's
 11 not about--that's not the primary focus, the
 12 primary focus is about instilling confidence
 13 in the public in our laboratory to provide
 14 good services, but more than that, to provide
 15 good services to the patient, I mean, that's
 16 part of the--that's part of it, but it's not
 17 all of it. I mean -
 18 CROSBIE, Q.C.:
 19 Q. Ms. Bonnell, did Eastern Health have a choice
 20 here between full disclosure at some potential
 21 cost for the reputation of the lab for
 22 confidence, verses not engaging in full
 23 disclosure at some risk for the reputation of
 24 Eastern Health for truth telling?
 25 MS. BONNELL:

Page 210

1 public to have faith in their laboratory that
 2 does tens of, I think it's 10 million tests a
 3 year. And again, putting it in the context of
 4 the fact that I'm musing here and just
 5 speaking opinions to George for him to
 6 consider. We were talking about, at that
 7 time, the fact that we had an issue in the lab
 8 and we had an issue in one particular section
 9 of the lab. The lab is divided up into many
 10 divisions, there are many different types of
 11 tests that are done in the laboratory. Some
 12 tests are black and white sort of tests, some
 13 tests are more grey. I would think that the
 14 ER/PR test, to some degree, falls in that
 15 category as opposed to tests where you, you
 16 know, get your blood count or something of
 17 that nature. Then there's other tests that
 18 are performed and the result of the test is
 19 used in combination with a whole bunch of
 20 other factors when a decision is being made on
 21 a treatment protocol. So there's different
 22 types of tests, there's different types of
 23 divisions within the lab, there's millions of
 24 tests that are done there on an annual basis
 25 and I guess what I'm saying is that at this

Page 212

1 A. I think that is in fact what happened. In so
 2 far as that we were not, we were not complete
 3 in what we said, in so far as we did not give
 4 all the information as we had all information
 5 available to us. I think that it did have an
 6 impact on individual's trust in Eastern Health
 7 as a larger organization.
 8 CROSBIE, Q.C.:
 9 Q. And this memo and the one that followed a day
 10 later, these were not full endorsement of the
 11 policy of full truth telling and disclosure,
 12 are they?
 13 MS. BONNELL:
 14 A. They're an--well, I think I was trying to
 15 capture for Mr. Tilley the feelings that were
 16 circulating amongst all of us at that
 17 particular time, not about whether we would
 18 try to hide anything from the public because
 19 that was never anybody's intention. It was
 20 all the matter of timing. It's when is it in
 21 the best interest of patients to do this and
 22 that's the basis upon which we acted, whether
 23 you agree or you disagree, that is the basis
 24 upon which the organization acted.
 25 CROSBIE, Q.C.:

Page 213

1 Q. If you can just move down to, well, item 3,
 2 bulleted item 3, page 1. The last two lines
 3 of that paragraph "We also have to be careful
 4 that we don't set ourselves up to have to re-
 5 do every single test done in the past where
 6 new technology improves our outcomes." If you
 7 think about that with more leisure than maybe
 8 you had at the time, wouldn't you agree that
 9 that kind of an issue or that kind of a
 10 decision is something not for the
 11 administration, but to be decided upon between
 12 a doctor and a patient?
 13 MS. BONNELL:
 14 A. Yes, I would agree with you.
 15 CROSBIE, Q.C.:
 16 Q. Just go down there into the fourth bulleted
 17 paragraph, and count down, one, two, three,
 18 four, five, six, the item that begins, "Could
 19 the very nature"?
 20 MS. BONNELL:
 21 A. Uh-hm.
 22 CROSBIE, Q.C.:
 23 Q. It says, "Could the very nature of our
 24 disclosure be a factor in litigation as it was
 25 in the Labrador case?" And up above it says,

Page 215

1 Q. And what about the last statement in that
 2 paragraph, "What impact will this announcement
 3 have nationally? Will we be forcing labs
 4 across the country to re-do all their tests."
 5 Is that a matter for those labs to sort out
 6 for themselves?
 7 MS. BONNELL:
 8 A. Certainly.
 9 CROSBIE, Q.C.:
 10 Q. Ms. Bonnell, moving down again to the bottom
 11 of that page, "A full public disclosure with a
 12 press conference and 1-800 information line,
 13 letters to all impacted patients in support of
 14 ministerial comment would not be my choice in
 15 this case."
 16 MS. BONNELL:
 17 A. Uh-hm, on that day, yes, that's true.
 18 CROSBIE, Q.C.:
 19 Q. Now, I put it to you that one possible reading
 20 of that would be simply a full public
 21 disclosure, letters to all impacted patients
 22 would not be my choice in this case; in other
 23 words, you weren't in favour of letters to
 24 patients, contrary to what you have testified?
 25 What's your response to that?

Page 214

1 "We need to consider what implications a
 2 public announcement will have on a variety of
 3 impacted stakeholders."
 4 MS. BONNELL:
 5 A. Uh-hm.
 6 CROSBIE, Q.C.:
 7 Q. Who was the stakeholder that you had in mind
 8 when you made that statement? "Nature of our
 9 disclosure be a factor in litigation."
 10 MS. BONNELL:
 11 A. I guess it doesn't refer back very neatly to
 12 stakeholder implication there, but it was just
 13 a question that I was raising for
 14 consideration. If these are just questions
 15 for consideration, as opposed to reasons to
 16 not make a public announcement, as I think I
 17 said with Mr. Coffey.
 18 CROSBIE, Q.C.:
 19 Q. Well, could the primary stakeholder in
 20 relation to that be an insurance company?
 21 MS. BONNELL:
 22 A. It could, I guess, yes, but of course, the
 23 insurance company in this case, you know, it's
 24 a reciprocal, so it's the organization too.
 25 CROSBIE, Q.C.:

Page 216

1 MS. BONNELL:
 2 A. On this day I'm saying that at this particular
 3 point in time, this was not my choice.
 4 CROSBIE, Q.C.:
 5 Q. To send a letter?
 6 MS. BONNELL:
 7 A. You will see later on that I have a different
 8 opinion on that, but yes, at this particular
 9 moment in time, on this day, I didn't feel
 10 that that was the choice.
 11 CROSBIE, Q.C.:
 12 Q. Okay. So when you testified "I always did
 13 think a letter to patients was a good idea",
 14 we have to qualify that in the way you have
 15 just explained?
 16 MS. BONNELL:
 17 A. I guess so, yes.
 18 CROSBIE, Q.C.:
 19 Q. So, Ms. Bonnell, this memo and the one
 20 afterwards, were drafted and the one
 21 afterwards accepted by Mr. Tilley, you just
 22 told us, without the benefit of a review of
 23 the policies of the institution, vis-a-vis
 24 patient disclosure?
 25 MS. BONNELL:

Page 217

1 A. That's correct.
 2 CROSBIE, Q.C.:
 3 Q. It was drafted and accepted by Mr. Tilley
 4 without the benefit of an ethics consult.
 5 MS. BONNELL:
 6 A. I'm not sure what you mean when you say
 7 "drafted and accepted" but yes, there was no
 8 ethics consult done.
 9 CROSBIE, Q.C.:
 10 Q. You've told us that the second one was
 11 accepted by him with no further amendments.
 12 MS. BONNELL:
 13 A. There was no further discussion after this, on
 14 this particular memo, but you will remember as
 15 well that within days of this memo being
 16 received by Mr. Tilley, he became more
 17 involved in the issue and did attend several
 18 meetings. There was another meeting on the
 19 first at which some key decisions were made;
 20 another one on the 10th, so he--there was
 21 never--I didn't get a memo following this from
 22 Mr. Tilley saying thank you, we will follow
 23 this as the policy as to how we move forward
 24 from this.
 25 CROSBIE, Q.C.:

Page 219

1 CROSBIE, Q.C.:
 2 Q. Very good. Again, to repeat the obvious, this
 3 was drafted and to the extent it was accepted
 4 by Mr. Tilley, this was done without the
 5 benefit of any outside consultation from
 6 experts in communications crisis management?
 7 MS. BONNELL:
 8 A. Yes, that's correct.
 9 CROSBIE, Q.C.:
 10 Q. And you're in the communication's field, you,
 11 I presume know what a focus group is.
 12 MS. BONNELL:
 13 A. Yes.
 14 CROSBIE, Q.C.:
 15 Q. Just say a word to the Commissioner about what
 16 a focus group is?
 17 MS. BONNELL:
 18 A. A focus group is usually used to pull opinion
 19 on an issue, so individuals are gathered, they
 20 may be shown a newsletter or they may be shown
 21 an advertisement or something of that nature
 22 and asked for opinion on that. We use them as
 23 well in auditing processes, so you pull a
 24 focus group of individuals together usually
 25 representative of sampling of your targeted

Page 218

1 Q. But you got nothing from him saying he
 2 disagreed with any aspect of -
 3 MS. BONNELL:
 4 A. No, that's correct.
 5 CROSBIE, Q.C.:
 6 Q. And so the answer to the question is that in
 7 so far as we're able to tell about his
 8 acceptance of the memo, it was drafted by you
 9 and accepted with the qualifications he
 10 mentioned, without the benefit of an ethics
 11 consult?
 12 MS. BONNELL:
 13 A. Yes.
 14 CROSBIE, Q.C.:
 15 Q. And we've heard from you prior about and we've
 16 seen the e-mail entitled "Help" to Hill and
 17 Knowlton?
 18 MS. BONNELL:
 19 A. A year later, yes.
 20 CROSBIE, Q.C.:
 21 Q. And amongst other things, these people would
 22 have expertise in crisis management, would
 23 they?
 24 MS. BONNELL:
 25 A. Yes, crisis communications management.

Page 220

1 stakeholder group. So if you wanted to reach
 2 moms, you'd pull together a focus group of
 3 some moms.
 4 CROSBIE, Q.C.:
 5 Q. And when you says "we", you're talking about
 6 your profession in communications?
 7 MS. BONNELL:
 8 A. Yes, focus groups are used in communications,
 9 they're used in quality, they're used in
 10 marketing, they're used in -
 11 CROSBIE, Q.C.:
 12 Q. They're even used by lawyers.
 13 MS. BONNELL:
 14 A. Sometimes, I'd say for sure.
 15 CROSBIE, Q.C.:
 16 Q. Lawyers who do jury trials, we don't do many
 17 of those here, but in other places they do, on
 18 a civil side. So what I'm coming around to is
 19 this would be a relatively small group of
 20 people and we're probably talking about six or
 21 eight or nine or something like that, is that
 22 right, a focus group?
 23 MS. BONNELL:
 24 A. It would depend, I guess, on--yes, usually a
 25 small group, less than ten, less than

Page 221

1 fourteen.

2 CROSBIE, Q.C.:

3 Q. Yes, and you would try out an idea or a

4 strategy or a concept or something along those

5 lines on a group of people who you would think

6 would have a similar interest, similar

7 perception to a target audience that you're

8 interested in communicating with?

9 MS. BONNELL:

10 A. Yes.

11 CROSBIE, Q.C.:

12 Q. So a focus group could be composed of a group

13 of affected patients, couldn't it?

14 MS. BONNELL:

15 A. Yes.

16 CROSBIE, Q.C.:

17 Q. Did you think of doing a focus group of

18 affected patients to sort through how to go

19 about the business of communicating with the

20 patients?

21 MS. BONNELL:

22 A. No, it wasn't considered.

23 CROSBIE, Q.C.:

24 Q. Do you think that might have been a good idea

25 to in effect ask the patient?

Page 223

1 that sort of a strategy had we had time to put

2 that in place before this event was upon us.

3 CROSBIE, Q.C.:

4 Q. It would have been a good idea, but not quite

5 so early in the game.

6 MS. BONNELL:

7 A. I don't think so, no, that's my opinion.

8 CROSBIE, Q.C.:

9 Q. But at some stage it would have been a good

10 idea?

11 MS. BONNELL:

12 A. I think so, yes.

13 CROSBIE, Q.C.:

14 Q. Let's go over to page 4, there's a statement

15 again about--it's right after Item B there,

16 paragraph sort of numbered B, "A full public

17 disclosure" and that appeared in the earlier

18 memo, this is now the one from a day later.

19 MS. BONNELL:

20 A. Yes.

21 CROSBIE, Q.C.:

22 Q. And we go on there and I think it's a news

23 statement where it appears "legal counsel and

24 risk management advise against such a

25 disclosure".

Page 222

1 MS. BONNELL:

2 A. I'll tell you when I think that that sort of

3 involvement probably should have begun, not at

4 this early stage because at this early stage,

5 we really did not know what we were dealing

6 with. I certainly didn't have a good handle

7 on what it was we were dealing with, but one

8 of the things that my colleagues and I within

9 Eastern Health have talked about when we're

10 looking at this issue, is the benefit that we

11 would have gained by bringing breast cancer

12 patients in throughout the period of time when

13 we were doing the panelling to find out what

14 we should have been talking about at that

15 point in time, so throughout the fall and into

16 the spring of 2006 and '07, we did--we have

17 sort of talked about that as being a benefit--

18 not necessarily a focus group, but I've

19 indicated before that I don't think we did a

20 great job of stakeholder mapping and

21 assessment and communications during that

22 period of time and there are many things to be

23 considered that I think had a formal crisis

24 communication strategy been in place for the

25 organization, may have been acknowledged in

Page 224

1 MS. BONNELL:

2 A. Particularly before the impacted patients have

3 the opportunity to hear from us, yes.

4 CROSBIE, Q.C.:

5 Q. That's what it says.

6 MS. BONNELL:

7 A. Yes.

8 CROSBIE, Q.C.:

9 Q. The legal counsel you have in mind there, was

10 this a lawyer for the insurance company, a

11 lawyer for Eastern Health or who was it, in

12 your mind?

13 MS. BONNELL:

14 A. In this particular case it was Mr. Boone.

15 CROSBIE, Q.C.:

16 Q. And who was he the lawyer for?

17 MS. BONNELL:

18 A. He was the lawyer for HIROC.

19 CROSBIE, Q.C.:

20 Q. So would it be understandable if people

21 reading this memo to Mr. Tilley for to take

22 from it that the largest influence on the

23 advice you gave was actually the advice of a

24 lawyer?

25 MS. BONNELL:

Page 225

1 A. I would not say that, no, but I suppose one
 2 could read it that way, but I would not read
 3 it that way.
 4 CROSBIE, Q.C.:
 5 Q. The lawyer for an insurance company, you've
 6 told us.
 7 MS. BONNELL:
 8 A. Yes. But you can see there, Mr. Crosbie, in
 9 the next paragraph I do say, "I recommend that
 10 we work directly with the medical community to
 11 quickly address each individual case, we
 12 notify patients of the retesting, either
 13 through formal letter or by some other means
 14 deemed appropriate by the oncologists, we move
 15 fast to identify and retest, we contact
 16 oncologists immediately" and so on. "We
 17 ensure that every patient is aware of their
 18 new test results, either by follow up with the
 19 physician or possibly by letter directly to
 20 the patient." So I was advocating in the
 21 benefit of a letter but was saying at this
 22 moment in time, right now, today, tomorrow, I
 23 don't think that going public, sending a
 24 letter to all the patients, setting up a 1-800
 25 line is the way to go. I remember at this

Page 227

1 the choice ended up working extremely badly.
 2 MS. BONNELL:
 3 A. I disagree with you that with all due respect,
 4 sir, that this is a foundational document,
 5 it's not a policy statement, it's a memo based
 6 on where we were at this moment in time and in
 7 terms of reputation of the lab, the issue of
 8 reputation of the lab is not raised in this
 9 particular draft of this memo in the same way
 10 it's raised in the other. I will say to you
 11 that maintaining the integrity of the lab was
 12 a consideration for us, given the fact that
 13 the laboratory performed so many other tests
 14 aside from ER/PR, but to stipulate that this
 15 is a policy document for the organization, I
 16 think would be overstating its importance by a
 17 long short.
 18 CROSBIE, Q.C.:
 19 Q. You haven't disagreed with what I have
 20 described though as the policy choice that the
 21 organization had to make.
 22 MS. BONNELL:
 23 A. Which was what again, sir?
 24 CROSBIE, Q.C.:
 25 Q. The choice between maintaining the reputation

Page 226

1 point in time we were talking about having a
 2 press conference within days, in fact, the
 3 date that we had originally set was not past
 4 for the press conference because of the
 5 briefing for the Minister. So there was an
 6 immediant--there was an urgency at that point
 7 to do a full public disclosure at that point
 8 in time and given where we were at that point
 9 in time, that was not what we were
 10 recommending. It's not that those things
 11 would never be done, it's just that on July
 12 22nd, I was advising against them being done
 13 at that point based on all of the things that
 14 we've talked about.
 15 CROSBIE, Q.C.:
 16 Q. Bottom line, Ms. Bonnell, is this document of
 17 yours is a foundational document for Eastern
 18 Health's policy, however developed that was,
 19 and how to communicate with patients and the
 20 public about this crisis and that implicit in
 21 it was a choice between full disclosure of
 22 everything Eastern Health knew, verses not
 23 disclosing everything, as an attempt to
 24 maintain the reputation of the lab for
 25 confidence or even for excellence, and that

Page 228

1 of the institution for truth telling, in other
 2 words, confidence in the truthfulness of
 3 Eastern Health versus risking, sorry, risking
 4 that reputation for truthfulness versus
 5 attempting to maintain the image of
 6 competence.
 7 MS. BONNELL:
 8 A. What I would say to you is that the reason
 9 that we made the decision not to do a public
 10 disclosure was based on an opinion that we
 11 owed it to our patients to provide them with
 12 information first before we did a public
 13 disclosure. And the opportunity to put the
 14 reputation ahead of the lab, the reputation
 15 ahead of all else is gone the moment you make
 16 a decision that you're going to start
 17 investigating and going back through and
 18 pulling out 2002 and 2003 and 2004. Once a
 19 decision is made that you're not going to just
 20 say, oh well, index case, you've had a change
 21 and thank you very much, that you're not going
 22 to even look at it, then we made that decision
 23 then long, long, long ago that this wasn't
 24 about the reputation of the lab, that it was
 25 about the patients. And the reputation of the

Page 229

1 lab is part of my job. Unlike other people
 2 who work in the organization, reputation is an
 3 issue with which I have to concern myself, as
 4 opposed to the clinical concerns that other
 5 people do bring to the table. So, it's going
 6 to appear in things that I write,
 7 consideration of reputation, but -
 8 CROSBIE, Q.C.:
 9 Q. And at this time you had a direct access to
 10 the CEO of the organization.
 11 MS. BONNELL:
 12 A. Certainly.
 13 CROSBIE, Q.C.:
 14 Q. And so you've described now what are among
 15 your priorities.
 16 MS. BONNELL:
 17 A. What are among my priorities?
 18 CROSBIE, Q.C.:
 19 Q. Your priorities as a communication specialist.
 20 MS. BONNELL:
 21 A. My priorities are to try and--you act as an
 22 advisor from a communications -
 23 CROSBIE, Q.C.:
 24 Q. I say you have just described one of your
 25 priorities.

Page 231

1 this has created anxiety for all patients who
 2 had been tested". Are those questions
 3 answered in the response?
 4 MS. BONNELL:
 5 A. This was a request from the Department, so we
 6 were providing them with our input into the
 7 response, that's what we were asked to
 8 provide. I'm not sure what the department
 9 would have done with these responses after,
 10 but this was Eastern Health's input, I guess.
 11 CROSBIE, Q.C.:
 12 Q. Well, the one that you saw, you were copied
 13 to, are the questions answered. They're good
 14 questions, right.
 15 MS. BONNELL:
 16 A. Yes.
 17 CROSBIE, Q.C.:
 18 Q. Do they get an answer?
 19 MS. BONNELL:
 20 A. We've attempted to provide a response to the
 21 question.
 22 CROSBIE, Q.C.:
 23 Q. Well, you say here "the decision to defer
 24 advising affected patients, etcetera, was made
 25 by a team, including" and then you list off

Page 230

1 MS. BONNELL:
 2 A. One of the priorities of a communications
 3 person in an organization is to consider the
 4 reputation of the organization, yes,
 5 absolutely true.
 6 CROSBIE, Q.C.:
 7 Q. I'm not saying that shouldn't be the case,
 8 it's just of interest possibly to the
 9 Commission to know that that is the case.
 10 Could we turn now to P-0154. This is a
 11 document that was copied to you Ms. Bonnell
 12 and if we can go to page two. This is
 13 somebody's questions on ER/PR and the date was
 14 21 November 05 and as we said, you were copied
 15 this. It originated from Deborah Thomas
 16 Pennell and at the top of page two we have,
 17 here's an issue or a question and then
 18 responses are outlined.
 19 MS. BONNELL:
 20 A. Yes.
 21 CROSBIE, Q.C.:
 22 Q. That's the general idea. So, question, why
 23 weren't patients immediately notified that the
 24 samples were being retested? And it says
 25 also, "would the Minister not acknowledge that

Page 232

1 the team. It doesn't mention the insurance
 2 lawyer, does it?
 3 MS. BONNELL:
 4 A. No, it doesn't.
 5 CROSBIE, Q.C.:
 6 Q. Wasn't the advice from the insurance lawyer
 7 key in that decision?
 8 MS. BONNELL:
 9 A. I don't believe it was, Mr. Crosbie.
 10 CROSBIE, Q.C.:
 11 Q. Very good. You say here, or the document says
 12 "the advice that swayed the decision was that
 13 it would cause excessive anxiety on patients."
 14 You're suggesting it wasn't that the decision
 15 was swayed by the advice of the insurance
 16 lawyer?
 17 MS. BONNELL:
 18 A. No, I don't believe it was, Mr. Crosbie. We
 19 did lots of things that, you know, everybody
 20 makes suggestions and you move forward. There
 21 were some decisions that we made that the
 22 lawyer may not have agreed with, but we made
 23 the decisions anyway.
 24 CROSBIE, Q.C.:
 25 Q. The date of this document is, as we observed,

Page 233

1 21st November '05, and do you recall when the
 2 Hanlon lawsuit was commenced?
 3 MS. BONNELL:
 4 A. No, I don't.
 5 CROSBIE, Q.C.:
 6 Q. I believe it was December 2005. That's my
 7 recollection now. I'm sure that one of the
 8 learned people here can correct that if I'm
 9 wrong on it, but that's my remembrance, and I
 10 believe that the class action was not started
 11 until July, early July I think it was, in
 12 2006.
 13 MS. BONNELL:
 14 A. Um-hm.
 15 CROSBIE, Q.C.:
 16 Q. This morning and before, you seemed to put
 17 forward as a strong reason not to be talking
 18 about the issues arising out of ER/PR testing,
 19 about the causation of the problem and the so-
 20 called rates of error, if that's the right
 21 term, and so on because of pending litigation.
 22 Is that something I understand correctly?
 23 MS. BONNELL:
 24 A. Yes.
 25 CROSBIE, Q.C.:

Page 235

1 MS. BONNELL:
 2 A. It wouldn't have been in December of 2005, no,
 3 I would agree with you there. But in 2006, it
 4 did have an impact on what we disclosed at
 5 that point in time.
 6 CROSBIE, Q.C.:
 7 Q. Yes, and you've testified to that effect
 8 earlier. Something that puzzles me, and we
 9 can find it at P-0287, and if the Registrar
 10 could please take us to page--well, first of
 11 all, you attended this meeting of the
 12 executive management team on June 13th, 2007?
 13 MS. BONNELL:
 14 A. Yes.
 15 CROSBIE, Q.C.:
 16 Q. You're listed there as an attendee, I believe.
 17 MS. BONNELL:
 18 A. Um-hm.
 19 CROSBIE, Q.C.:
 20 Q. And can you take us then to page two, please,
 21 Registrar? There's a few things that could be
 22 asked about in this, but I'm looking at item
 23 6.--sorry, 1.6, under the title "CEO meeting
 24 with Minister and Deputy Minister" and then if
 25 we count down 1-2-3, item four. It says

Page 234

1 Q. Okay, but there was no pending litigation
 2 until December 2005, if I'm right in my dates.
 3 MS. BONNELL:
 4 A. Yes, but the causative factors and the
 5 discussion of that was in December of 2006,
 6 when we did the media briefing in 2006, which
 7 was, in fact, after the class action lawsuit
 8 had been initiated.
 9 CROSBIE, Q.C.:
 10 Q. Yes, but Dr. Banerjee and Ms. Wegrynowski and
 11 whatnot and so forth, there was a lot known by
 12 late November 2005 about -
 13 MS. BONNELL:
 14 A. Yes.
 15 CROSBIE, Q.C.:
 16 Q. - what went wrong and you know, you had a lot
 17 of statistical information available to you at
 18 Eastern Health before litigation ever started,
 19 didn't you?
 20 MS. BONNELL:
 21 A. Yes, certainly we did.
 22 CROSBIE, Q.C.:
 23 Q. So then litigation pending wouldn't have been
 24 an answer to not disclosing the information
 25 you had, would it?

Page 236

1 "HIROC" and we know HIROC is the insurance
 2 company, yes? "HIROC's concern with full
 3 disclosure and the impact on insurability."
 4 Can you explain to me what on earth that
 5 means?
 6 MS. BONNELL:
 7 A. No, sir, I can't recall Mr. Tilley's or the
 8 executive's discussion there on that.
 9 CROSBIE, Q.C.:
 10 Q. Thank you. Can we go now to the Beverley
 11 Green testimony that I asked the Registrar to
 12 find earlier? And the page numbers for this
 13 testimony are as they appear here, if anyone
 14 wants to note them. This was testimony given
 15 by a patient, her name is Beverley Green and
 16 was given on March 19. You can see starting
 17 at page 77 and this was toward the end of her
 18 examination. And I just want to highlight a
 19 couple of things she says and get your
 20 response to it. There at 78, line 10, this
 21 is, I believe, it's either Mr. Coffey or Ms.
 22 Chaytor asking the question, "as a breast
 23 cancer patient, what is your view on how the
 24 responsible authorities handled the
 25 communication of this issue and the response

Page 237

1 to this situation"? And then down at 16, "the
 2 whole way it was handled was very
 3 unprofessional, very sneaky, deceiving, just
 4 everything that builds even more resentment
 5 and more doubts and I think it could have been
 6 a lot better". Dropping down a little, "I
 7 know I have a disease that's probably going to
 8 destroy my life at some time and these are
 9 realities we know as cancer patients". I'm
 10 going to the next page, top, 79, line 3 "the
 11 way this was handled, it was just
 12 unforgivable" and dropping down to line 16,
 13 "how could it have been better" the questioner
 14 asks. Ms. Green says, "I think if we'd been
 15 approached on an individual basis and things
 16 were admitted to us, everyone makes mistakes.
 17 Sometimes we're much more forgiving when we're
 18 told straight out than when we are led to be
 19 misled or deceived". Now at page 80, second
 20 line, "to show us a little respect and show us
 21 that they care, it would have made a
 22 difference to me personally and to be honest,
 23 I probably wouldn't have even become a part of
 24 the suit, if I had known". Do you have
 25 anything to say to either Ms. Green or other

Page 239

1 CROSBIE, Q.C.:
 2 Q. I'm sure this hasn't been easy for you. On
 3 her behalf and others, I thank you for your
 4 candor and that's all I have.
 5 MS. BONNELL:
 6 A. Thank you.
 7 THE COMMISSIONER:
 8 Q. Thank you, Mr. Crosbie. Mr. Pritchard?
 9 MR. PRITCHARD:
 10 Q. Thank you, Commissioner, I don't have any
 11 questions of this witness. Thank you for your
 12 testimony.
 13 MS. BONNELL:
 14 A. Thank you.
 15 THE COMMISSIONER:
 16 Q. Any questions?
 17 MS. HENNEBURY:
 18 Q. I have no questions.
 19 MS. O'DEA:
 20 Q. Commissioner, we have no questions.
 21 THE COMMISSIONER:
 22 Q. Thank you, Ms. O'Dea. Ms. Hennebury (sic.),
 23 I'm just looking at the clock, would it be
 24 better if we took the afternoon break before
 25 you started, unless you're going to be a very

Page 238

1 class members or patients in response to that
 2 kind of testimony and concern that we just
 3 looked at?
 4 MS. BONNELL:
 5 A. I agree with Ms. Green that Eastern Health
 6 didn't do a good job of communicating this
 7 publicly. And I take personal responsibility
 8 for that insofar as I can, insofar as my own
 9 ability to influence the decision making that
 10 we made. I do agree with her that this could
 11 have been done better. That the patient
 12 disclosure, aside of this, often got confused
 13 and misdirected by the public side of it, that
 14 we weren't as open and as forthright publicly
 15 as we should have been. And I'm very sorry to
 16 see that--and I watched Ms. Green and I
 17 watched all the patients testify and I've
 18 heard many of these comments that they felt
 19 that they were deceived; they felt that they
 20 couldn't trust the organization and I think
 21 that's very unfortunate. It makes me feel
 22 sad. And as I've expressed over the last
 23 three and a half days, there are many things
 24 about this that we could have done better,
 25 many things.

Page 240

1 short period of time. Why don't we do that?
 2 MS. NEWBURY:
 3 Q. I'm going to be a while.
 4 THE COMMISSIONER:
 5 Q. All right, we'll take the afternoon break and
 6 then continue.
 7 (RECESS)
 8 THE COMMISSIONER:
 9 Q. Thank you, please be seated. Ms. Newbury,
 10 just before you begin, I want to just indicate
 11 that the problem raised in respect of the
 12 exhibit that Mr. Crosbie referred to earlier
 13 regarding some people having received un-
 14 redacted versions. The explanation is that
 15 that particular document was redacted when we
 16 received it and then it was distributed to
 17 other counsel in the form that we received it.
 18 The software which we use cannot be redacted
 19 further, so if you get it using our software,
 20 you would not be able to--if there's such a
 21 word--un-redact. So, as a result we would ask
 22 counsel in the future, if you want us to
 23 redact something, to outline it and allow us
 24 to react using our own software and that will
 25 prevent anyone being able to un-redact--once

Page 241

1 again if that's a word. Our investigation
 2 reveals that only one such document currently
 3 exists in the material that has been produced
 4 and I understand counsel has been asked to
 5 return that document so we can provide you
 6 with a properly redacted version.
 7 Thank you. Now, Ms. Newbury?
 8 MS. SUSAN BONNELL, EXAMINATION BY JENNIFER NEWBURY
 9 MS. NEWBURY:
 10 Q. Thank you. Good afternoon, Ms. Bonnell.
 11 MS. BONNELL:
 12 A. Good afternoon.
 13 MS. NEWBURY:
 14 Q. Jennifer Newbury for the Canadian Cancer
 15 Society, Newfoundland and Labrador Division.
 16 I want to ask you first about the strategic
 17 plan that you had mentioned last week and a
 18 little bit today in your evidence and the fact
 19 that it would have been advisable to have one
 20 in place. Does that relate, in your view, to
 21 communications issues only, that strategic
 22 plan that you're referring to?
 23 MS. BONNELL:
 24 A. Yes.
 25 MS. NEWBURY:

Page 243

1 identifying a stakeholder group, looking at
 2 their current knowledge or understanding of an
 3 issue, their opinions of an issue and how best
 4 to communicate with a group. Those sorts of
 5 things would be considered in a stakeholder
 6 map. It identifies key messages that you wish
 7 to communicate. And then it would have some
 8 sort of an action strategy or perhaps a
 9 timeline depending on the type of strategy.
 10 There's usually a budget component if such a
 11 thing would matter and an evaluation component
 12 as well at the end.
 13 MS. NEWBURY:
 14 Q. And when would one typically implement or
 15 develop a strategic communications plan?
 16 MS. BONNELL:
 17 A. Within Eastern Health, there used, you know, a
 18 full-on, well-developed strategic
 19 communications plan, there'd be one that
 20 exists, for example, for a Burin Needs
 21 Assessment.
 22 MS. NEWBURY:
 23 Q. Sorry, I didn't -
 24 MS. BONNELL:
 25 A. The Board's initiative to do a needs

Page 242

1 Q. Okay. And it wouldn't include any other
 2 decisions or areas on the ER/PR issue -
 3 MS. BONNELL:
 4 A. No.
 5 MS. NEWBURY:
 6 Q. - outside of communications?
 7 MS. BONNELL:
 8 A. No.
 9 MS. NEWBURY:
 10 Q. Okay. And would that strategic plan be a
 11 formal written document?
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. Okay. And what types of content would be in
 16 the strategic plan?
 17 MS. BONNELL:
 18 A. A strategic communications plan, it's like a
 19 test. Let me see if I can remember all the
 20 elements. It states an issue. It identifies
 21 background research, background and or
 22 research, if it's pertinent. It identifies
 23 stakeholders. A well developed strategic
 24 communications plan also includes something
 25 called stakeholder mapping which is

Page 244

1 assessment on the Burin Peninsula. There was
 2 a full communications strategy developed for
 3 that. If you had an event, usually a strategy
 4 is not developed, a small event. You'd have a
 5 time line or an agenda, that sort of thing,
 6 but when you have a big issue that you're
 7 dealing with, there is a communications
 8 strategy in place. For example, for Burin
 9 Radiology, which we've talked briefly about
 10 here in the context that it came up in the
 11 time of the ER/PR story in May of 2007.
 12 My only explanation to there not being
 13 one for ER/PR is the way in which the story
 14 evolved, that in those very early days, we
 15 didn't know if we had an issue and it seemed
 16 that it just evolved and evolved and evolved
 17 and at no point was that strategy ever put in
 18 place, and in fact, I would say to you that
 19 when I was asked to pull the materials for the
 20 Commission of Inquiry, I was surprised to see
 21 that I had not done a strategic plan.
 22 MS. NEWBURY:
 23 Q. Is that something though you would have used
 24 throughout -
 25 MS. BONNELL:

Page 245

1 A. Yes.
 2 MS. NEWBURY:
 3 Q. - when you're involved in large events, you'd
 4 go back and refer to your strategic plan?
 5 MS. BONNELL:
 6 A. Yes. It's a living--it's like any planning
 7 document. It's not a finished piece of work
 8 and then you put it on the shelf. It's a
 9 living document. So it breathes all the way
 10 through the life of something, gets changed,
 11 revised, things happen as you go along.
 12 MS. NEWBURY:
 13 Q. So I assume from what you're saying, it would
 14 be best to implement a strategic plan early
 15 on, as soon as you recognize it is potentially
 16 a big issue?
 17 MS. BONNELL:
 18 A. Yes.
 19 MS. NEWBURY:
 20 Q. But would nothing prevent you--or would
 21 anything prevent you from implementing that,
 22 you know, perhaps six months into a larger
 23 issue?
 24 MS. BONNELL:
 25 A. Well, there's a strategic plan for the

Page 247

1 crisis management plan, I think is the term
 2 that you used?
 3 MS. BONNELL:
 4 A. A crisis communications strategy or a plan for
 5 an organization is a general document that
 6 exists that outlines--it can be referred back
 7 to no matter what the crisis. So it's a
 8 general document that guides the organization
 9 when it's dealing with any type of crisis. In
 10 the previous organizations, I know of two
 11 crisis communications plans that existed. The
 12 Health Care Corporation was one of those where
 13 I worked and we did have a crisis
 14 communications plan, but the plan was
 15 developed from the perspective of emergencies.
 16 So it would help you know what to do if the
 17 roof blew off the Health Sciences, but it
 18 wasn't much help to us in the instance that we
 19 were dealing with here.
 20 MS. NEWBURY:
 21 Q. So do I take it then from your evidence that
 22 the communications--crisis communications plan
 23 is a framework that's general in nature and
 24 can apply to different types of events,
 25 perhaps with some qualifications on whether it

Page 246

1 Commission of Inquiry, communications plan for
 2 the Commission of Inquiry, for example.
 3 MS. NEWBURY:
 4 Q. So that's an example.
 5 MS. BONNELL:
 6 A. Yes.
 7 MS. NEWBURY:
 8 Q. Okay. Now aside from the strategic
 9 communications plan, are you aware of any
 10 other strategic plan for handling the ER/PR
 11 issue generally on other decisions not related
 12 to communications?
 13 MS. BONNELL:
 14 A. No, I'm not.
 15 MS. NEWBURY:
 16 Q. Okay, and had one been in place, is that
 17 something that might trigger in your mind that
 18 well, you know, there's a strategic plan in
 19 place to deal with ER/PR, we should now focus
 20 our minds on a strategic communications plan?
 21 MS. BONNELL:
 22 A. Yes.
 23 MS. NEWBURY:
 24 Q. And can you just explain the difference
 25 between a strategic communications plan and a

Page 248

1 can be easily adapted to, so the ER/PR issue -
 2 MS. BONNELL:
 3 A. It's guiding principles for dealing with
 4 crisis.
 5 MS. NEWBURY:
 6 Q. Whereas a strategic communications plan would
 7 be issue specific?
 8 MS. BONNELL:
 9 A. That's correct.
 10 MS. NEWBURY:
 11 Q. It would be developed specifically for, say,
 12 the ER/PR issue?
 13 MS. BONNELL:
 14 A. Yes, I mean, an organization can have a
 15 strategic communications plan for--that guides
 16 its communications over a three--you know,
 17 we're in the process of developing right now,
 18 certainly in the strategic communications
 19 department and my department in internal
 20 communications will be involved in it as well,
 21 in developing a communications strategy for
 22 the organization for the next three years,
 23 which would identify guiding principles, that
 24 sort of thing. There -
 25 MS. NEWBURY:

Page 249

1 Q. Sorry, would there be something in that plan
 2 that could be used, relied upon to deal with
 3 an issue of communication regarding ER/PR or
 4 is that more broad?
 5 MS. BONNELL:
 6 A. It would outline principles for the
 7 organization, yes, so you could rely on it in
 8 that sense, yes.
 9 MS. NEWBURY:
 10 Q. But it still would be better to have an issue
 11 specific strategic communications plan?
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. Okay. Now you'd mentioned sometime during
 16 your evidence last week that when preparing
 17 the July 22nd, 2005 memo that you have
 18 discussed at some length, that ultimately was
 19 prepared for Mr. Tilley and Dr. Williams, that
 20 one of the possible uses for that document was
 21 for the official record?
 22 MS. BONNELL:
 23 A. Yes.
 24 MS. NEWBURY:
 25 Q. Can you recall that evidence last week?

Page 251

1 MS. NEWBURY:
 2 Q. Sure, I understand, you know, why you thought
 3 he wanted you to revise it and to formalize, I
 4 guess, the structure of the memo a little
 5 differently, but what did you mean by official
 6 record?
 7 MS. BONNELL:
 8 A. That's all I meant. I didn't mean anything
 9 more specific than that.
 10 MS. NEWBURY:
 11 Q. For official purposes, perhaps.
 12 MS. BONNELL:
 13 A. Right.
 14 MS. NEWBURY:
 15 Q. You're not aware of any official record
 16 actually being maintained by Mr. Tilley or
 17 anyone else regarding ER/PR?
 18 MS. BONNELL:
 19 A. No, no.
 20 MS. NEWBURY:
 21 Q. There's no room with a binder or cabinet with
 22 -
 23 MS. BONNELL:
 24 A. No.
 25 MS. NEWBURY:

Page 250

1 MS. BONNELL:
 2 A. Yes.
 3 MS. NEWBURY:
 4 Q. You weren't sure whether that was the case,
 5 but that was something that you speculated was
 6 a possibility.
 7 MS. BONNELL:
 8 A. I speculated that only because Mr. Tilley
 9 asked me to rewrite the original draft.
 10 MS. NEWBURY:
 11 Q. Okay. Now what did you mean by the term
 12 "official record"?
 13 MS. BONNELL:
 14 A. I think it was clear to Mr. Tilley in the
 15 first memo that I wrote that it was not
 16 written with any formality whatsoever, and it
 17 was my understanding, based on the
 18 conversation that I had with him, that he
 19 intended to--he wanted to have that memo
 20 written in such a way that if he chose to use
 21 it for another purpose, he could use it for
 22 that purpose. I really believed that he
 23 wanted that memo rewritten and formalized so
 24 that he could share it with Mr. Abbott. That's
 25 what I thought that he wanted it for.

Page 252

1 Q. - all of the official formal records for this?
 2 MS. BONNELL:
 3 A. Well, there are now, but -
 4 MS. NEWBURY:
 5 Q. Right, but not at the time?
 6 MS. BONNELL:
 7 A. Not at the time.
 8 MS. NEWBURY:
 9 Q. Would it have assisted you, in terms of your
 10 role in communications, to have had an
 11 official record in place from which to gather
 12 information or to seek information and I'm
 13 thinking about your various interactions,
 14 communications with, for example, the
 15 Department of Health, internal communications
 16 and communications with the public that you
 17 ultimately became involved in? Would that
 18 have been any assistance to you to have such
 19 an official record?
 20 MS. BONNELL:
 21 A. Yes, it would have.
 22 MS. NEWBURY:
 23 Q. Okay, and you've mentioned from time to time
 24 that you've been preparing some documents with
 25 haste, under time constraints.

Page 253

1 MS. BONNELL:
 2 A. Um-hm.
 3 MS. NEWBURY:
 4 Q. Would that have eased that concern?
 5 MS. BONNELL:
 6 A. Yes, I think it may have, yes.
 7 MS. NEWBURY:
 8 Q. And from a communications perspective, what
 9 types of things would you like to have seen in
 10 the official record?
 11 MS. BONNELL:
 12 A. I think I made--in late 2007, I think I made a
 13 recommendation to executive, in terms of
 14 crisis communications, that some measures be
 15 put in place in future to help manage a crisis
 16 on a larger scale, and it was my understanding
 17 that my recommendations were under
 18 consideration, along with others, from a
 19 planning department perspective. But one of
 20 the things that I certainly talked about was
 21 the fact that without a centralized database--
 22 within communications, within my own
 23 department, we used shared directories. It's
 24 very beneficial if you had a PC lost, for
 25 example, which we did have at one point in

Page 255

1 Q. Who made those decisions?
 2 MS. BONNELL:
 3 A. Yes.
 4 MS. NEWBURY:
 5 Q. And the basis for the decision?
 6 MS. BONNELL:
 7 A. One of the learnings from ER/PR was that as
 8 people changed and meetings were held, when
 9 you go back to look at steps that you'd taken
 10 and decision points that you had made, we
 11 discovered that there wasn't an official
 12 record of those meetings, that it was whatever
 13 everybody had in their notebooks, that there
 14 wasn't a secretary attending all the meetings
 15 and keeping minutes and, in fact, when we had
 16 the issue with radiology come up in May, the
 17 approach to that was much different. Meetings
 18 were minuted and it helped keep decision
 19 points clearer. It was a much clearer process
 20 to use, and that was something that I
 21 certainly agreed with.
 22 MS. NEWBURY:
 23 Q. And when you say the decision point, that's
 24 basically what meeting, what precise date was
 25 a decision made to do something or to not do

Page 254

1 time, we lost--one of my staff people lost
 2 their PC and lost everything on the PC, you
 3 know. If you've got all your information
 4 shared in your own personal PCs, it makes it
 5 difficult then if I needed to refer to
 6 something that Dr. Denic would have knowledge
 7 of and it was a pre-written document that I'm
 8 then going to go look for. If we were working
 9 from a shared directory of information, a
 10 shared folder, even electronically, I think it
 11 would have eased the process of pulling
 12 materials together.
 13 MS. NEWBURY:
 14 Q. And is that only within the communications
 15 department or would you see a broader official
 16 record to which you might have access?
 17 MS. BONNELL:
 18 A. I was thinking of a broader record to which I
 19 would have access, yes.
 20 MS. NEWBURY:
 21 Q. And would that include things such as what
 22 decisions had been made previously?
 23 MS. BONNELL:
 24 A. Yes.
 25 MS. NEWBURY:

Page 256

1 something?
 2 MS. BONNELL:
 3 A. Right.
 4 MS. NEWBURY:
 5 Q. And would that also include the basis for the
 6 decision and any people in favour, anyone
 7 against it?
 8 MS. BONNELL:
 9 A. I guess so, yes, as much as any--you know,
 10 when you work in a consensus environment, as
 11 much as any organization would do that.
 12 MS. NEWBURY:
 13 Q. And when you say meetings are minuted, that
 14 means you have someone there whose sole
 15 responsibility is to record what happens at
 16 the meeting?
 17 MS. BONNELL:
 18 A. That's correct.
 19 MS. NEWBURY:
 20 Q. And would that be circulated so that any
 21 inaccuracies in the recording would be
 22 corrected?
 23 MS. BONNELL:
 24 A. Corrected as you go back, yeah.
 25 MS. NEWBURY:

Page 257

1 Q. Now when you gave evidence last week, you'd
 2 indicated, among some of your work experience,
 3 you had a lot of experience in writing patient
 4 information booklets and website materials
 5 when you were initially hired by--I'm not sure
 6 if it was Eastern Health or the Health Care
 7 Corporation.
 8 MS. BONNELL:
 9 A. Health Care Corporation.
 10 MS. NEWBURY:
 11 Q. Health Care Corporation. Were you responsible
 12 for the content of those booklets or the style
 13 of the booklets or both?
 14 MS. BONNELL:
 15 A. No, I'd never be responsible for content of a
 16 medical booklet. Certainly something like an
 17 annual report or, for lack of a better word, a
 18 promotional type of a brochure, we may very
 19 well have been responsible for content of
 20 that, but clinical materials would have been
 21 drawn from the clinical experts and then we'd
 22 help them put it together, which is still the
 23 process that's used today.
 24 MS. NEWBURY:
 25 Q. Okay. So that's to make sure it's readable, I

Page 259

1 A. Well, most of the people in Quality who are--
 2 they're all clinicians and many of them have
 3 expertise in patient relations, and of course,
 4 we do have some individuals as well in amongst
 5 our management team come to my mind. There's
 6 a couple of individuals who have done further
 7 training on preparing materials for patients
 8 and that kind of thing. I guess what I would
 9 bring or any communications professional would
 10 bring to that kind of environment is
 11 readability and graphic standards, that kind
 12 of thing.
 13 MS. NEWBURY:
 14 Q. I'm sorry, what was that?
 15 MS. BONNELL:
 16 A. Graphic standards.
 17 MS. NEWBURY:
 18 Q. Graphic standards, okay.
 19 MS. BONNELL:
 20 A. And readability issues.
 21 MS. NEWBURY:
 22 Q. And who are the individuals that, in your
 23 view, have expertise in this particular area?
 24 You said there's some people in the Quality
 25 department.

Page 258

1 guess, to people and it presents well on a
 2 brochure or website?
 3 MS. BONNELL:
 4 A. That's correct.
 5 MS. NEWBURY:
 6 Q. And would you have had any special training
 7 for this or is it just your general job
 8 experience?
 9 MS. BONNELL:
 10 A. In terms of?
 11 MS. NEWBURY:
 12 Q. In terms of being able to communicate, I
 13 guess, with patients on the information that
 14 you include there?
 15 MS. BONNELL:
 16 A. No, but we do have a number of people who work
 17 in the organization who do have that sort of
 18 experience.
 19 MS. NEWBURY:
 20 Q. Okay.
 21 MS. BONNELL:
 22 A. So they would be involved as well.
 23 MS. NEWBURY:
 24 Q. Would they be clinicians or others?
 25 MS. BONNELL:

Page 260

1 MS. BONNELL:
 2 A. Well, certainly the people in Quality, there
 3 are individuals who work within the Quality
 4 department who have expertise in patient
 5 relations.
 6 MS. NEWBURY:
 7 Q. Okay, would that include Heather Predham and
 8 Nancy Parsons?
 9 MS. BONNELL:
 10 A. Yes, but we also have patient educators who
 11 work throughout the organization as well. I
 12 couldn't name them for you. There's numerous
 13 patient educators who work in -
 14 MS. NEWBURY:
 15 Q. And that's the title, is it, patient
 16 educators?
 17 MS. BONNELL:
 18 A. I believe it is, yes.
 19 MS. NEWBURY:
 20 Q. And they're affiliated with the Quality
 21 department?
 22 MS. BONNELL:
 23 A. No, they'd be affiliated with their program
 24 specialty area. You know, I'm also cognizant
 25 of the fact that I'm speaking specifically

Page 261

1 about acute care. You know, in community,
 2 there are people who work in health promotion
 3 who have expertise in that area.
 4 MS. NEWBURY:
 5 Q. Sure, okay. Who would be the best person to
 6 elaborate a bit on what the expertise is in
 7 these types of areas, patient educators? Who,
 8 in your organization, would be best able to
 9 speak to that, in terms of their skills and
 10 training?
 11 MS. BONNELL:
 12 A. Perhaps Ms. Pilgrim might be a good person to
 13 ask. Yeah, I think.
 14 MS. NEWBURY:
 15 Q. Okay, thank you. Now when you first were
 16 hired by the Health Care Corporation, were you
 17 ever provided with a formal job description?
 18 I can't recall seeing anything in writing.
 19 MS. BONNELL:
 20 A. Yes, I would have been, yes.
 21 MS. NEWBURY:
 22 Q. Okay. Can you recall, you know, what that
 23 generally would have stated?
 24 MS. BONNELL:
 25 A. No, I can't, but there was a job description

Page 263

1 understand the distinction between those two
 2 different views?
 3 MS. BONNELL:
 4 A. I would say everybody working within Eastern
 5 Health understood the distinction, yes.
 6 MS. NEWBURY:
 7 Q. Okay. And you, I take it from your answer
 8 that you would feel that such clear
 9 distinction would be necessary?
 10 MS. BONNELL:
 11 A. It's assumed, you know, it's an expectation -
 12 MS. NEWBURY:
 13 Q. And you don't disagree with that assumption or
 14 expectation?
 15 MS. BONNELL:
 16 A. No. I mean, my opinion was certainly sought
 17 on issues of patient disclosure, but it would
 18 have been that, it would have been an opinion.
 19 MS. NEWBURY:
 20 Q. Okay. By whom?
 21 MS. BONNELL:
 22 A. For example, on the letter which came up a
 23 couple of times today, the quality department
 24 may have asked me to take a first run at
 25 writing a letter which they would have then

Page 262

1 for a communications specialist that existed
 2 at that point in time.
 3 MS. NEWBURY:
 4 Q. And did that actually refer to any
 5 communication with patients?
 6 MS. BONNELL:
 7 A. No, communication with patients is not part of
 8 the job description.
 9 MS. NEWBURY:
 10 Q. Either are a group or individually, okay.
 11 Now, in terms of the--your involvement in the
 12 communications issue pertaining to ER/PR was
 13 there a clear demarkation between the concept
 14 of disclosure to patients and communication
 15 with the public on this issue?
 16 MS. BONNELL:
 17 A. Insofar as public disclosure sort of was my
 18 responsibility, any issues in public
 19 disclosure whereas patient and individual
 20 disclosure fell within quality and medical
 21 community.
 22 MS. NEWBURY:
 23 Q. Okay. And do you think that that was made
 24 clear to everyone involved in the issue
 25 throughout, did everyone, in your view,

Page 264

1 taken and revised and did whatever they were
 2 going to do with it. I feel a little bit like
 3 I've said it repeatedly, but I mean, it is a
 4 kind of organization that works in a team
 5 environment and by consensus and by advice, so
 6 advise is sought, consensus is built.
 7 MS. NEWBURY:
 8 Q. And can you recall who in the quality
 9 department might have asked you to take the
 10 first crack at writing this letter?
 11 MS. BONNELL:
 12 A. The patient letter?
 13 MS. NEWBURY:
 14 Q. Yes.
 15 MS. BONNELL:
 16 A. I don't know if I would have been asked to do
 17 that by someone in the quality department or
 18 if that would have been a direction from Dr.
 19 Williams for me to write the letter. But the
 20 letter would have then been passed on to
 21 quality to Heather Predham who would have
 22 coordinated the response from a quality
 23 perspective. So who she would have involved
 24 in that, I don't know.
 25 MS. NEWBURY:

Page 265

1 Q. So aside from that particular task that you
 2 had some involvement in, do you feel that in
 3 any other way that you were involved in giving
 4 advice on any issues pertaining to patient
 5 disclosure?
 6 MS. BONNELL:
 7 A. That's a broad question. I mean, I was part of
 8 the people who sat around the table and
 9 discussed these issues, so my opinion was
 10 heard on a number of different factors, but
 11 whether it was the deciding point, I would say
 12 no.
 13 MS. NEWBURY:
 14 Q. Okay. But -
 15 MS. BONNELL:
 16 A. I mean, we certainly discussed the decision to
 17 make phone calls, we discussed--I mean, there
 18 was a number of things that were discussed
 19 that--and I have said that I indicated that I
 20 felt a letter should have been sent to the
 21 patients. You give your advice and then
 22 decisions are made after the advice is given.
 23 MS. NEWBURY:
 24 Q. So it's not a situation where you say,
 25 "Listen, there's a clear distinction between

Page 267

1 ministerial comment is not recommended. And
 2 this is actually your own personal opinion?
 3 MS. BONNELL:
 4 A. Yes.
 5 MS. NEWBURY:
 6 Q. Okay. Now, and this is dealing with an aspect
 7 of communication with patients and you're
 8 talking about impact to patients. So this is
 9 actually disclosure of information to patients
 10 as opposed to general communication with the
 11 public?
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. Who may not be patients and have anything to
 16 do with cancer at all or breast cancer in
 17 particular?
 18 MS. BONNELL:
 19 A. Right.
 20 MS. NEWBURY:
 21 Q. Okay. So that is an example there where you
 22 are participating in it in some respects -
 23 MS. BONNELL:
 24 A. Yes.
 25 MS. NEWBURY:

Page 266

1 patient disclosure and public disclosure. I'm
 2 here--or public communication. I'm here
 3 wearing the hat of a communications person,
 4 I'm only going to comment on public issues,
 5 public communications issue." You would
 6 actually offer your opinion even though you
 7 thought you're not responsible in any way for
 8 -
 9 MS. BONNELL:
 10 A. We all offered opinions on every issue, yes.
 11 MS. NEWBURY:
 12 Q. If I could have Exhibit 0304, please? You're
 13 probably tired of looking at this document.
 14 Actually, page 3 of the exhibit, please? That
 15 is the July 22nd memo, that was the final
 16 version, I believe, of this document.
 17 MS. BONNELL:
 18 A. Yes.
 19 MS. NEWBURY:
 20 Q. And if we go then to--I just want to turn over
 21 to page 4. Paragraph 3, and this was referred
 22 to this morning. And here you're saying that
 23 a full public disclosure with a press
 24 conference, 1-800 information line, letters to
 25 all impacted patients and supportive

Page 268

1 Q. - by giving an opinion. And paragraph 2 on
 2 that page--actually, paragraph 2 but item, or
 3 letter A, "It is critical that we consult with
 4 the oncologists to get their expert advice on
 5 how to inform the impacted individuals that
 6 their specimens can be retested." Okay, so
 7 here you're suggesting that outside advice or
 8 expert advice from oncologists be sought. But
 9 it would appear to me, reading this document,
 10 that you were looking for advice only on a
 11 limited area, on how to inform the impacted
 12 individuals that their specimens can be
 13 retested?
 14 MS. BONNELL:
 15 A. Yes.
 16 MS. NEWBURY:
 17 Q. Not about should we contact all patients to
 18 advise them of retesting?
 19 MS. BONNELL:
 20 A. Um-hm.
 21 MS. NEWBURY:
 22 Q. Whether they've been impacted or not, I mean,
 23 it's a very narrow area that you're looking
 24 for advice from them?
 25 MS. BONNELL:

Page 269

1 A. Yes.
 2 MS. NEWBURY:
 3 Q. Okay. And paragraph 4, you indicate here
 4 that, "I recommend that we work directly with
 5 the medical community to quickly address each
 6 individual case that converts from a negative
 7 to a positive ER/PR." So again, you seem to
 8 be giving an opinion there about how to deal
 9 with conversions from negative to positive.
 10 So would you agree, then, that this certainly
 11 shows that you were providing an opinion?
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. A contribution in relation to patient
 16 disclosure issues?
 17 MS. BONNELL:
 18 A. Yes.
 19 MS. NEWBURY:
 20 Q. Okay.
 21 MS. BONNELL:
 22 A. Just to clarify, if it helps at all, I mean,
 23 the difference between many times that patient
 24 disclosure occurs, the majority of times that
 25 patient disclosure occurs and this particular

Page 271

1 demarkation between the issues of
 2 communication with the public and patient
 3 disclosure, was it always uppermost in
 4 someone's mind that when decisions were made
 5 that they were being made by individuals who
 6 are focusing on their role for patient
 7 disclosure or their expertise in patient
 8 disclosure versus someone's expertise in
 9 communications with the public?
 10 MS. BONNELL:
 11 A. You have a group of people and they're working
 12 together on an issue and then everybody goes
 13 into their own corners to take what's their
 14 responsibility and deal with. So when that
 15 group of people are together, everybody is
 16 talking, everybody is bringing ideas, throwing
 17 them on the table, working as a team and then
 18 everybody goes to their own corner to deal
 19 with that which they're responsible for.
 20 MS. NEWBURY:
 21 Q. And do you feel that when everyone goes to
 22 their corner and they take responsibility for
 23 what they have expertise in, that the person
 24 who ultimately makes decisions or the group
 25 that might ultimately make decisions clearly

Page 270

1 case is that most of the time we're dealing
 2 with a very small group of individuals or one
 3 individual, whereas in this case we knew we
 4 were dealing with hundreds, I'm not sure that
 5 we even know that we were close to 1000, but
 6 we certainly knew that we were dealing with
 7 hundreds of individuals at this point.
 8 MS. NEWBURY:
 9 Q. Um-hm.
 10 MS. BONNELL:
 11 A. And there's a obvious overlap that occurs when
 12 you're talking about that large a number of
 13 individuals. And we were constantly trying to
 14 find a balance between doing what was right by
 15 the patients, treating them in the same way
 16 that they should expect to be treated if they
 17 were one as opposed to having to deal with
 18 hundreds. And it was a very difficult line to
 19 negotiate, it was a very difficult balance to
 20 achieve and, in fact, I don't believe we did a
 21 good job of achieving it.
 22 MS. NEWBURY:
 23 Q. And I guess it's the overlap that I see when I
 24 read some of these documents that lead me to
 25 ask you whether you felt there was a clear

Page 272

1 understands the basis for decisions on public
 2 communications versus the basis for a decision
 3 on patient communications?
 4 MS. BONNELL:
 5 A. I'm not sure that that--I'm not sure that I'm
 6 clear what is it that you want me to say
 7 there. Decisions are made, there's multiple
 8 thought brought to the table and then teams go
 9 away and handle that which they're responsible
 10 for, whether there's a demarkation between,
 11 I'm having a hard time answering that
 12 question. I'm not sure what it is that you're
 13 looking for from me.
 14 COMMISSIONER:
 15 Q. The implication of what you're saying is that
 16 there's always a consensus.
 17 MS. BONNELL:
 18 A. No, I don't think that there's always a
 19 consensus. I think sometimes leaders will
 20 make decisions within their own purview, so
 21 there's not always a consensus, no. You work
 22 as a group, then you leave the group and you
 23 go away with that which you're responsible for
 24 and make decisions. So there might be
 25 discussion, there might be different opinions

Page 273

1 thrown on the table using consensus as a guide
 2 for how you go about discussing issues, but at
 3 the end of the day sometimes decisions had to
 4 be made and individuals make those decisions.
 5 MS. NEWBURY:
 6 Q. Perhaps if I could have Exhibit 0616, please?
 7 This is an e-mail that you forwarded to Dr.
 8 Williams and to Denise Dunn. And the subject
 9 is "Letter to physicians for the NLMA
 10 website." And I took it from your evidence
 11 the other day that this is a letter that
 12 prepared?
 13 MS. BONNELL:
 14 A. I would have made a first draft of, yes.
 15 MS. NEWBURY:
 16 Q. Okay. And you don't know ultimately what
 17 became of that letter but it was your
 18 information in this first draft?
 19 MS. BONNELL:
 20 A. Yes.
 21 MS. NEWBURY:
 22 Q. Okay. And would you agree that this
 23 information contained in the letter, and if
 24 you want to take some time go to through it,
 25 would ultimately be relayed to many patients

Page 275

1 A. Yes.
 2 MS. NEWBURY:
 3 Q. And without that what means would the
 4 physician have to gather information to relay
 5 to their patients?
 6 MS. BONNELL:
 7 A. Right.
 8 MS. NEWBURY:
 9 Q. Okay. And do you know, you said that this was
 10 your first draft. Do you know who else might
 11 have been involved in drafting the letter
 12 after it left your hands?
 13 MS. BONNELL:
 14 A. Quite often in these cases I'm asked by a
 15 member of the executive to take a first stab
 16 at writing a document and then that executive
 17 person takes it and revises it for--this is a
 18 letter from Dr. Williams, you know, that he
 19 wanted to send, so I took a first cut at
 20 drafting it for him and I can't recall if we
 21 ever did post a letter with the NLMA on their
 22 website or send it through the NLMA at this
 23 point in time. I know we did that later on,
 24 but I don't recall if we did this at this
 25 point.

Page 274

1 who were involved in the ER/PR issue -
 2 MS. BONNELL:
 3 A. It's possible, yes, yeah.
 4 MS. NEWBURY:
 5 Q. And that was in your mind at the time that you
 6 were preparing this letter?
 7 MS. BONNELL:
 8 A. Yes, well, we were trying to--Dr. Williams
 9 wanted to send a letter to physicians so that
 10 physicians were aware of what was going on
 11 with the retesting.
 12 MS. NEWBURY:
 13 Q. Sure. And with a view that if a patient
 14 happened to be one of those patients who had
 15 breast cancer in the appropriate time period
 16 and had an ER/PR question, they can go to
 17 their physician and quite conceivably or you
 18 would expect that such a patient would be
 19 given information along the lines of what's in
 20 this letter?
 21 MS. BONNELL:
 22 A. Yes.
 23 MS. NEWBURY:
 24 Q. That was the whole point of the letter?
 25 MS. BONNELL:

Page 276

1 MS. NEWBURY:
 2 Q. If I could have Exhibit P-0355, please? This
 3 is an e-mail October 18th, 2005 that you
 4 forwarded to Dr. Williams, Denise Dunn,
 5 Patricia Pilgrim, Heather Hanrahan, Dr. Cook,
 6 Deborah Thomas-Pennell and George Tilley. And
 7 it attaches some advertising. And -
 8 MS. BONNELL:
 9 A. I think Heather Hanrahan is probably an error.
 10 MS. NEWBURY:
 11 Q. Heather Predham it should be?
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. And in the body of the e-mail itself you can
 16 see there starting at the second paragraph
 17 that there's a reference to a TV spot and text
 18 message and a voiced over reading with the
 19 following information. And then you refer to
 20 the following content, "Eastern Health is
 21 retesting breast cancer tissue samples that
 22 were ER and PR negative. This summer our lab
 23 discovered inconsistent results in a patient's
 24 sample which lead us to retest all negative
 25 results. We want to ensure that all patients

Page 277

1 have every treatment opportunity that may be
 2 available to them. Anyone who is being
 3 retested will be contacted. If you had breast
 4 cancer and would like more information about
 5 this process, please call our patients
 6 relations officer." and the number is given.
 7 Was this your message that you drafted?
 8 MS. BONNELL:
 9 A. Yes.
 10 MS. NEWBURY:
 11 Q. Okay. And I assume from the content of the
 12 message that you contemplated that it might
 13 reach patients who are in the group tested for
 14 ER/PR between '97 and 2005?
 15 MS. BONNELL:
 16 A. Yes. Okay. And attached to the e-mail -
 17 MS. BONNELL:
 18 A. Is material that -
 19 MS. NEWBURY:
 20 Q. Yeah, the last paragraph, "We will put the web
 21 address on the bottom of the screen throughout
 22 the advertisement and will post the newspaper
 23 ad on the website.
 24 MS. BONNELL:
 25 A. Uh-hm.

Page 279

1 receptor results since 1997." Then there's a
 2 heading "What are ER and PR receptors?"
 3 Another heading, "What is happening now?" And
 4 the note is made again, "All patients who are
 5 being retested are being contacted."
 6 MS. BONNELL:
 7 A. We had made the decision at that point to make
 8 phone calls.
 9 MS. NEWBURY:
 10 Q. Okay. And second last paragraph, "If you have
 11 breast cancer and are concerned about your
 12 previous test results and treatment, you may
 13 wish to contact your oncologist, surgeon or
 14 family doctor."
 15 MS. BONNELL:
 16 A. Uh-hm.
 17 MS. NEWBURY:
 18 Q. "You may also call the patient relations
 19 officer at Eastern Health" and the number is
 20 given. "She will attempt to answer your
 21 questions or link you with someone who can
 22 help." So again it appears that your intended
 23 audience for this particular ad would include
 24 patients who had breast cancer and would have
 25 had ER/PR testing during the relevant time

Page 278

1 MS. NEWBURY:
 2 Q. And I believe the newspaper ad is what is
 3 attached, is that correct?
 4 MS. BONNELL:
 5 A. That's a draft of it, for sure.
 6 MS. NEWBURY:
 7 Q. It's a draft, okay, and is it your draft?
 8 MS. BONNELL:
 9 A. I'm not--well yes, yes, it was drafted in my
 10 office.
 11 MS. NEWBURY:
 12 Q. Okay, so the communications department
 13 prepared this.
 14 MS. BONNELL:
 15 A. Uh-hm.
 16 MS. NEWBURY:
 17 Q. And if you read down through it, "You may have
 18 heard in the media that Eastern Health is
 19 retesting breast cancer tissue samples. This
 20 summer the lab at the Health Sciences
 21 discovered some inconsistent results in one
 22 patient's tissue sample. To ensure that all
 23 patients have every treatment opportunity that
 24 may be available to them, Eastern Health has
 25 decided to retest all the negative ER and PR

Page 280

1 period.
 2 MS. BONNELL:
 3 A. Yes.
 4 MS. NEWBURY:
 5 Q. So it certainly seems from these examples that
 6 you appear to be contributing some advice?
 7 You have some input there about patient
 8 disclosure through the physicians and through
 9 this advertisement.
 10 MS. BONNELL:
 11 A. Well, I'm also the tool through which these
 12 messages are delivered in that I'm the
 13 individual who writes the ads and who--so I'm
 14 the mechanism through which these things get
 15 communicated. It doesn't necessarily--I'm not
 16 sure, you know, the decision and the advice
 17 and that sort of thing, you know, I mean
 18 clearly there's going to be communications
 19 messages that exist to patients that are
 20 publicly produced, so -
 21 MS. NEWBURY:
 22 Q. But this is your, you actually take the first
 23 crack, as you said earlier, at the content of
 24 this and perhaps the tone and the level of
 25 detail -

Page 281

1 MS. BONNELL:
 2 A. Possibly, yes.
 3 MS. NEWBURY:
 4 Q. And whether or not that's revised to any
 5 significant extent, you haven't really -
 6 MS. BONNELL:
 7 A. I don't think that that message was
 8 particularly revised, the one you just
 9 highlighted.
 10 MS. NEWBURY:
 11 Q. Uh-hm, okay. So were you thinking at the time
 12 that you're actually contributing here to
 13 advice about patient disclosures? Was that in
 14 your mind at the time?
 15 MS. BONNELL:
 16 A. No.
 17 MS. NEWBURY:
 18 Q. I recognize that it's through a public vehicle
 19 and that's within your department, but had you
 20 focused on the fact that some patients may be
 21 hearing for the first time about an adverse
 22 event that relates to them -
 23 MS. BONNELL:
 24 A. Yes.
 25 MS. NEWBURY:

Page 283

1 public communication and it's communication to
 2 individual stakeholders, but it's not
 3 disclosure.
 4 MS. NEWBURY:
 5 Q. Okay, you don't consider that to be
 6 disclosure?
 7 MS. BONNELL:
 8 A. I don't consider it in the same way, no.
 9 THE COMMISSIONER:
 10 Q. So is it not disclosure if it's done by a
 11 public means? Is that what distinguishes
 12 disclosure from communication?
 13 MS. BONNELL:
 14 A. I guess I'm just trying to draw a distinction
 15 between the concept of patient disclosure as
 16 it's used in the health care system and this.
 17 Certainly it is disclosure, Madam
 18 Commissioner, that this information is being
 19 disclosed to them in that sense of the word,
 20 but patient disclosure is a terminology used
 21 in health care to talk about contact with a
 22 patient to disclose an adverse event directly
 23 to them. It was our hope that those
 24 disclosures would be done, not this way, which
 25 is in fact what happened for some of these

Page 282

1 Q. Through information that you're pulling
 2 together yourself.
 3 MS. BONNELL:
 4 A. Yes.
 5 MS. NEWBURY:
 6 Q. Had you focused on that at the time?
 7 MS. BONNELL:
 8 A. We were aware that there would be patients who
 9 would be hearing about this for the first time
 10 through advertising, media stories and these
 11 other mechanisms, but I would draw a very
 12 distinct--I would draw a distinction between
 13 this, which is communications with stakeholder
 14 groups and disclosure. It's, you know,
 15 patient disclosure, perhaps it's a piece of
 16 jargon or a technical term that's used within
 17 health care, but disclosure is the disclosure
 18 of an adverse event directly with an
 19 individual and I understand what you're
 20 saying, but you know, I am sure that there
 21 were many women and men who heard about this
 22 through this type of--through seeing it on our
 23 web or seeing it in advertisement, but I
 24 wouldn't call it part of the patient
 25 disclosure process. It's communication, it's

Page 284

1 individuals, but in the meantime, I had also
 2 hoped that these individuals would make
 3 contact with us to learn more about their
 4 individual--perhaps it's the late hour, but
 5 disclosure may be better explained by somebody
 6 in quality who can talk more directly to what
 7 disclosure means, you know, in the health care
 8 setting.
 9 MS. NEWBURY:
 10 Q. So in your mind, you did not think that your
 11 activities, even though they were reaching a
 12 patient perhaps for the first time and
 13 explaining some of the background information
 14 about this adverse event -
 15 MS. BONNELL:
 16 A. Uh-hm.
 17 MS. NEWBURY:
 18 Q. You did not consider that to be disclosure?
 19 MS. BONNELL:
 20 A. Not patient disclosure in the way that it's
 21 used in the health care, no.
 22 MS. NEWBURY:
 23 Q. And do you know if anyone at Eastern Health,
 24 particularly those who were on your team
 25 throughout the handling of the ER/PR issue,

Page 285

1 considered these types of things to be patient
 2 disclosure?
 3 MS. BONNELL:
 4 A. You would have to ask them that, I think.
 5 MS. NEWBURY:
 6 Q. I'm asking you if you were aware if anyone
 7 considered this to be patient disclosure.
 8 I'll ask, obviously, other individuals if they
 9 considered it to be, but did you think that
 10 anyone considered this to be patient
 11 disclosure?
 12 MS. BONNELL:
 13 A. No, not in that sense, no.
 14 MS. NEWBURY:
 15 Q. And had you ever heard of the concept of group
 16 disclosure to patients or disclosing to a
 17 group of patients who are involved in a mass
 18 adverse event as an example?
 19 MS. BONNELL:
 20 A. I've certainly read about it since, but I
 21 don't know if I was aware of the concept in
 22 2005.
 23 MS. NEWBURY:
 24 Q. Okay, are you aware of the concept that
 25 disclosure to patients can be considered a

Page 287

1 Q. And I take it then from your evidence that you
 2 considered this to be just another type of
 3 communication within the mandate of the
 4 communications department? There was nothing
 5 unique about this that in your mind set it
 6 apart from your regular press releases or
 7 other communications?
 8 MS. BONNELL:
 9 A. No.
 10 MS. NEWBURY:
 11 Q. Did you ever consult with anyone, either
 12 internal or external to Eastern Health for any
 13 guidance on how to prepare information of this
 14 type that would be reaching patients, even
 15 though you didn't consider that to be a
 16 patient disclosure?
 17 MS. BONNELL:
 18 A. No.
 19 MS. NEWBURY:
 20 Q. You had indicated earlier, I believe, that
 21 there are experts--I've covered that off. If
 22 I could have exhibit P-0304 please? Back to
 23 this memo, page 4, item B, the fourth
 24 paragraph on that page. You indicated here
 25 that "We should be concerned that this could

Page 286

1 continuing event, not just one media where all
 2 information is given, but a series of
 3 communications with the patient?
 4 MS. BONNELL:
 5 A. Yes, yes.
 6 MS. NEWBURY:
 7 Q. And you did not consider your initial
 8 introduction to many of these breast cancer
 9 patients or perhaps a follow up to another
 10 media event or even a follow up to a call that
 11 might have been made by a patient relation
 12 officer to be part of that continuing
 13 providing of information officially from the
 14 organization to the patient about their
 15 adverse event to be part of disclosure?
 16 MS. BONNELL:
 17 A. No.
 18 MS. NEWBURY:
 19 Q. Did you have any reservations about your
 20 ability to contribute any advice on, say the
 21 content of the website information or the
 22 letter to the physicians?
 23 MS. BONNELL:
 24 A. No.
 25 MS. NEWBURY:

Page 288

1 be portrayed in a black and white way,
 2 particularly if the media are involved. Just
 3 because a patient tested negative for ER/PR
 4 previously but now tests positive, does not
 5 automatically mean that the patient will get
 6 hormonal therapy. The media and the public
 7 cannot be expected to understand the nuances
 8 of cancer diagnosis and the many variables
 9 that determine treatment." And this is your
 10 memo to Mr. Tilley and to Dr. Williams. What
 11 is your basis for this statement, that "the
 12 media and public cannot be expected to
 13 understand the nuances of treatment of cancer
 14 diagnosis and the many variables that
 15 determine treatment"?
 16 MS. BONNELL:
 17 A. Probably based on where I was with daily
 18 meetings on this particular issue and weekly
 19 meetings, certainly for three months in that I
 20 didn't understand it. When I was sitting with
 21 experts every day and having them explain it
 22 to me, it's complex and ER/PR and the impact
 23 that ER/PR has on treatment and therapies has
 24 so many variables that play into it, that it
 25 is complex and it's difficult to--it's

Page 289

1 difficult to explain in a way that is straight
 2 forward. I would never, you know, it's not
 3 intended to be patronizing in any way, shape
 4 or form, in terms of public's understanding of
 5 cancer. Everybody deals with cancer in their
 6 families at some level and certainly the
 7 patients who are going through the treatments
 8 themselves, some of these patients are very
 9 well informed, do a terrific amount of
 10 research, take it upon themselves to learn
 11 many things. It's just that to go out and try
 12 and portray this in a way that makes it easy
 13 to understand is hard to do.

14 MS. NEWBURY:
 15 Q. At the time that you were trying to grapple
 16 with understanding this and perhaps why you
 17 thought it was a complex issue at the time, as
 18 I understand your evidence, related to the
 19 fact that every day there is new information
 20 there. It's not so much that the idea was too
 21 complex for you to understand, it's just that
 22 the information was evolving.

23 MS. BONNELL:
 24 A. That's correct.

25 MS. NEWBURY:

Page 291

1 A. No, it's not, no.

2 MS. NEWBURY:
 3 Q. That means that we don't yet know what message
 4 to give to the media and the public, it's
 5 saying something quite different?

6 MS. BONNELL:
 7 A. Yes, that's right.

8 MS. NEWBURY:
 9 Q. Do you have any idea of the types of
 10 information that oncologists explain to their
 11 patients on a daily basis about cancer
 12 diagnosis and variables of treatment?

13 MS. BONNELL:
 14 A. I've never been diagnosed with cancer myself
 15 and I've never sat in a room where that's
 16 discussed, so, no.

17 MS. NEWBURY:
 18 Q. And you don't know the nature of the
 19 information, the level of detail or not, you
 20 really have no idea?

21 MS. BONNELL:
 22 A. No.

23 MS. NEWBURY:
 24 Q. And you wouldn't know then what, perhaps lay
 25 people, patients, for example, are capable of

Page 290

1 Q. But at the point in time that you go to the
 2 public with a message about the ER/PR issue,
 3 would you not by then have sorted out all of
 4 the information and have reached a bit of a
 5 plateau in terms of the information gathering
 6 and then be able to explain to the public and
 7 the media?

8 MS. BONNELL:
 9 A. Ms. Newbury, that's exactly what I wanted to
 10 do and that's why we didn't do a press
 11 released at this point in time was because we
 12 really wanted to have a better understanding
 13 of what it was that we were talking about. We
 14 wanted to have a plateau of knowledge that we
 15 never achieved at this point, and certainly on
 16 the 22nd, after just discovering new
 17 information, I felt that we were in an even
 18 greater deficit to try and go public at that
 19 particular--on that particular week.

20 MS. NEWBURY:
 21 Q. But that's not the same thing as saying that
 22 the media and the public cannot be expected to
 23 understand the nuances of cancer diagnosis and
 24 the many variables that determine treatment?

25 MS. BONNELL:

Page 292

1 understanding based on any experience or
 2 education that you have?

3 MS. BONNELL:
 4 A. No.

5 MS. NEWBURY:
 6 Q. Wouldn't you think that if issues are properly
 7 explained to the media and the public that
 8 there is some way of communicating to them the
 9 nuances of cancer diagnosis and the many
 10 variables of treatment?

11 MS. BONNELL:
 12 A. Yes, ma'am, I do and we did attempt to try and
 13 do that when we started to talk about ER/PR in
 14 October and what the purpose of the test was
 15 and how it's used in determining treatment
 16 protocol. So we did attempt to try and do
 17 some of that, yes.

18 MS. NEWBURY:
 19 Q. And were those attempts successful at any--I
 20 mean, were some of the media and public
 21 capable of understanding what the ER/PR test
 22 was all about?

23 MS. BONNELL:
 24 A. Yes.

25 MS. NEWBURY:

Page 293

1 Q. I know that all the information wasn't given
 2 to them, but do you think people generally
 3 understood when it was explained to them what
 4 ER/PR testing is for?
 5 MS. BONNELL:
 6 A. I think that some people understand and that
 7 some people don't understand. I think that
 8 the reporting that we see even going on today,
 9 exhibits some lack of understanding of ER/PR
 10 and -
 11 MS. NEWBURY:
 12 Q. But you've seen lots of reporting that quite
 13 effectively explains it.
 14 MS. BONNELL:
 15 A. I have, I have and at the same time I have
 16 seen lots that doesn't. I've heard commentary
 17 from individuals calling open line shows, that
 18 sort of thing, who clearly don't have an
 19 understanding and that's not their fault.
 20 Part of the responsibility lies with Eastern
 21 Health to be more responsive to that. If you
 22 look at the press briefing that we did in
 23 December of 2006, I think we did a good job at
 24 that point of trying to pull together all the
 25 information and things that one would need to

Page 295

1 A. The decision that I was talking about was the
 2 decision to not do a press briefing in July or
 3 August of the summer of 2005, but rather to
 4 attempt to notify patients first about the
 5 retesting process.
 6 MS. NEWBURY:
 7 Q. And how about the process that those patients
 8 were to be notified, whether it was by letter
 9 or some other means? Is that part of the
 10 decision that you wouldn't change today?
 11 MS. BONNELL:
 12 A. Well, the decision originally, you know,
 13 there's a lot of decision points and lots of
 14 places where we changed our minds and we've
 15 looked at all those and tried to find where is
 16 the point where a decision was made. But
 17 after August 10th or 12th, my understanding
 18 was that we were going to send all the test
 19 samples away, we were going to wait. We were
 20 going to wait about six weeks and within six
 21 weeks, the test results would be back and the
 22 process of individually notifying those
 23 patients would begin.
 24 MS. NEWBURY:
 25 Q. And is that part of the decision that you say

Page 294

1 know to understand the pathology of
 2 immunohistochemistry and ER/PR as it impacts
 3 upon patients. But even that is, you know,
 4 there's a lot of information.
 5 MS. NEWBURY:
 6 Q. But it depends, wouldn't you agree, on the
 7 approach and the willingness of the
 8 organization to get out there and to explain
 9 it? I mean, that's probably the primary
 10 factor as opposed to whether or not the media
 11 and the public are capable of understanding.
 12 MS. BONNELL:
 13 A. Yes.
 14 MS. NEWBURY:
 15 Q. During your evidence you had indicated that
 16 there was a tragic flaw that no strategic plan
 17 for communications was done and when you were
 18 discussing that, you made a comment that when
 19 you look back on the decision to try and
 20 notify patients, you said you wouldn't change
 21 a thing about that because even today you feel
 22 that that's the right decision to make. I
 23 wonder if you could elaborate on what decision
 24 you were talking about?
 25 MS. BONNELL:

Page 296

1 you wouldn't change today, that you agree
 2 with?
 3 MS. BONNELL:
 4 A. That's correct.
 5 MS. NEWBURY:
 6 Q. And do you feel that you have the expertise to
 7 provide an opinion here on that particular
 8 issue or is that your personal comment or do
 9 you feel that that's something within the
 10 realm of what you do in the communications
 11 department at Eastern Health?
 12 MS. BONNELL:
 13 A. I think that as the director of communications
 14 for one of the largest health authorities in
 15 Atlantic Canada, that my opinion as some
 16 merit. I'm in the position and I do feel that
 17 my opinion has some merit.
 18 MS. NEWBURY:
 19 Q. But this is in relation to notification of
 20 patients, when to notify them, what to notify
 21 them -
 22 MS. BONNELL:
 23 A. But that decision was made upon the advice of
 24 our oncologists. That wasn't my decision to
 25 make, that decision was made by the group and

Page 297

1 I agreed with that decision. I still agree,
 2 it's my personal opinion, but it is my
 3 opinion.
 4 MS. NEWBURY:
 5 Q. Okay, I guess what I'm trying to get at is
 6 whether you feel that that opinion is based on
 7 any expertise that you think that you might
 8 bring to the equation or whether it's just
 9 sort of looking on the outside at the decision
 10 that was made by others and saying I agree
 11 with what you did?
 12 MS. BONNELL:
 13 A. Well I was part of the decision-making process
 14 and we felt that we did what was in the best
 15 interest of patients and we did it.
 16 MS. NEWBURY:
 17 Q. But in terms of what's in the best interest of
 18 patients, you don't actually have any personal
 19 experience or education on those issues?
 20 MS. BONNELL:
 21 A. No.
 22 THE COMMISSIONER:
 23 Q. When you said the results would be back in six
 24 weeks and then you would notify the patient -
 25 MS. BONNELL:

Page 299

1 terms of we will tell those whose treatment
 2 has changed and then by the process of telling
 3 the public, we're going to tell the rest of
 4 them?
 5 MS. BONNELL:
 6 A. No, I don't believe the decision had been
 7 formulated, but the decision that we did make
 8 was to notify patients whose treatment had
 9 changed through their physician or the most
 10 responsible physician; to notify patients
 11 whose treatment hadn't changed, through
 12 Eastern Health's Quality Department.
 13 THE COMMISSIONER:
 14 Q. Uh-hm.
 15 MS. BONNELL:
 16 A. And that -
 17 THE COMMISSIONER:
 18 Q. Was that decision know or even thought about
 19 at that stage?
 20 MS. BONNELL:
 21 A. I don't think it was made at that point.
 22 THE COMMISSIONER:
 23 Q. Okay. Sorry, carry on Ms. Newbury.
 24 MS. NEWBURY:
 25 Q. At one point during your evidence in the last

Page 298

1 A. Uh-hm.
 2 THE COMMISSIONER:
 3 Q. All patients or the ones whose through the
 4 panelling process treatment were to be
 5 changed?
 6 MS. BONNELL:
 7 A. It was understanding that we would notify all
 8 patients, that once we had the test results
 9 back for the patients whose treatments would
 10 change, that they would be notified and then
 11 there would be a public disclosure at that
 12 point.
 13 THE COMMISSIONER:
 14 Q. I'm sorry, so the six weeks were over and the
 15 results would come back, they would be
 16 panelled, some would have recommendations for
 17 change and they would be notified through the
 18 process of going through the physician. Those
 19 who had not been changed would be notified
 20 through the fact that you were going to tell
 21 the public or in another way? Was that
 22 decision--I know that at some point the
 23 decision was made, but that's what I'm trying
 24 to figure out, whether or not at that stage
 25 the notification of patients was thought in

Page 300

1 couple of days, you indicated to the
 2 Commissioner that you were having difficulty
 3 understanding the issue in totality and being
 4 able to speak with confidence or to prepare to
 5 speak--to prepare your spokespeople to speak
 6 with confidence on this issue and you made
 7 that comment at about the time that you were
 8 discussing events in late July, 2005, around
 9 the time of the meeting with the Minister of
 10 Health. And I'm wondering how long did that
 11 persist, your lack of comfort, I guess, with
 12 the understanding of the issue?
 13 MS. BONNELL:
 14 A. It was just in that timeframe, immediate
 15 timeframe when we had new information, I think
 16 that's what we were talking about here, that
 17 in order to prepare for a press conference on
 18 the 23rd or 25th or 26th that we weren't
 19 comfortable at that point.
 20 MS. NEWBURY:
 21 Q. Now, at that time you were preparing the memo
 22 that's up on the screen now, the options for
 23 disclosure, that was dated July 22nd, 2005,
 24 did you share your concerns with either Mr.
 25 Tilley or Dr. Williams about your lack of

Page 301

1 comfort with understanding the totality of the
 2 issue?
 3 MS. BONNELL:
 4 A. Well I think that's expressed somewhat in this
 5 memo, but I think we all talked about that it
 6 was a bit of a roller coaster, I think I used
 7 that term too, that every day there was new
 8 information.
 9 MS. NEWBURY:
 10 Q. And in terms of your difficulty understanding
 11 the issue, was it solely due to the evolution
 12 or did your lack of understanding of the
 13 technical components of the -
 14 MS. BONNELL:
 15 A. No, it had to do with my--the evolving
 16 information.
 17 MS. NEWBURY:
 18 Q. But in terms of when information of a
 19 technical nature was relayed to you, you
 20 didn't have any concerns about that, about the
 21 meaning of it?
 22 MS. BONNELL:
 23 A. No, no.
 24 MS. NEWBURY:
 25 Q. Now Ms. Bonnell, you've mentioned a few times

Page 303

1 effectively you're delivering messages, to
 2 pick up on--there's many reasons to monitor
 3 media.
 4 MS. NEWBURY:
 5 Q. Is identifying the accuracy of stories, media
 6 stories, important?
 7 MS. BONNELL:
 8 A. Sometimes, yes.
 9 MS. NEWBURY:
 10 Q. Okay. When are they important and when are
 11 they not important?
 12 MS. BONNELL:
 13 A. Well, I guess it's always good to have
 14 accurate media stories, but the problem is
 15 constantly trying to chase down inaccuracies
 16 can be a problem. If you are constantly after
 17 the media over small inaccuracies in stories,
 18 it causes difficulty with them and if it's not
 19 substantive to the piece, the question is why
 20 continue to go over and over and over
 21 something. So you know, but sometimes
 22 inaccuracies are important to correct.
 23 MS. NEWBURY:
 24 Q. Would they be more important when the
 25 inaccuracy appears to be attributed to or said

Page 302

1 that the department monitors or tracks media
 2 reports that relate to Eastern Health. I
 3 wonder if you could identify what all of the
 4 purposes would be for doing this?
 5 MS. BONNELL:
 6 A. The primary purpose for doing it is to
 7 understand the stories that are--or to be
 8 knowledgeable about the stories that are being
 9 presented about the organization itself.
 10 MS. NEWBURY:
 11 Q. To what end?
 12 MS. BONNELL:
 13 A. To be able to appreciate public opinion on
 14 things going on within the organization, to
 15 monitor trends. Sometimes an issue will come
 16 nationally, for example, and it'll start in
 17 the national media and you'll see it and
 18 you'll know eventually this is an infection
 19 control issue, for example, that is eventually
 20 going to land on our door when the local media
 21 want to know how the local health authority
 22 deals with this issue. So sometimes you do it
 23 to monitor trends. Sometimes you do it to get
 24 a sense of how dominate or prominent your
 25 spokespeople are in media coverage, how

Page 304

1 by a representative or a spokesperson of
 2 Eastern Health, as opposed to someone else?
 3 MS. BONNELL:
 4 A. For me, it would be, yes.
 5 MS. NEWBURY:
 6 Q. And would it be more important to correct the
 7 inaccuracy of the stories where you're seeing
 8 the same inaccuracy repeated over and over
 9 again?
 10 MS. BONNELL:
 11 A. Yes. Like for example, the breast screening,
 12 constantly calling it breast screening, breast
 13 screening, which was an issue for the Cancer
 14 Society I know too.
 15 MS. NEWBURY:
 16 Q. And in that case, even if there was just one
 17 story out of 20 that incorrectly identified
 18 breast cancer screening, would you not take
 19 steps to correct that? Would some
 20 inaccuracies be so compelling that -
 21 MS. BONNELL:
 22 A. I may or may not, yes. It would be nice to
 23 have the luxury as well to be able to sit all
 24 day and look at stories and correct things,
 25 but unfortunately, in the environment in which

Page 305

1 we were operating, it was move on to the next
 2 thing, move on to the next thing.
 3 MS. NEWBURY:
 4 Q. Generally speaking, in the run of a day, how
 5 many spokespeople for Eastern Health are out
 6 in the media giving reports? Is that a daily
 7 occurrence or weekly?
 8 MS. BONNELL:
 9 A. It's certainly a daily occurrence.
 10 MS. NEWBURY:
 11 Q. And are there multiple stories at the time?
 12 MS. BONNELL:
 13 A. Yes, there can be multiple issues. Multiple
 14 stories, multiple issues.
 15 MS. NEWBURY:
 16 Q. And you're -
 17 MS. BONNELL:
 18 A. We get on average about 500 to 600 media
 19 inquiries a year, so you know, some days you
 20 get 15, some days you get one. So it depends
 21 on the issue.
 22 MS. NEWBURY:
 23 Q. So resources or the ability to have people to
 24 actually do this was a concern?
 25 MS. BONNELL:

Page 307

1 Health, was there adequate monitoring of the
 2 media that he was reporting in or having
 3 comments attributed to him?
 4 MS. BONNELL:
 5 A. Yes, I believe there was. Yes, we certainly
 6 had transcripts and whatnot of all of his
 7 pieces and in almost all the interviews that
 8 we did, we attempted to have an individual
 9 present with him when he did those interviews
 10 as well to help facilitate that.
 11 MS. NEWBURY:
 12 Q. Someone from the Communications department?
 13 MS. BONNELL:
 14 A. Yes.
 15 MS. NEWBURY:
 16 Q. And who would that have been?
 17 MS. BONNELL:
 18 A. Either myself or Deborah Thomas would have--we
 19 would have attempted to be there with him, but
 20 we couldn't be there for all of them.
 21 MS. NEWBURY:
 22 Q. Okay, and following those several interviews
 23 by Dr. Williams, did you see any concerns or
 24 have any inaccuracies brought to your
 25 attention? Was your general impression,

Page 306

1 A. It was.
 2 MS. NEWBURY:
 3 Q. And was that ever expressed to anyone by you,
 4 Mr. Tilley or Dr. Williams or anyone at
 5 Department of Health, that "we just simply
 6 don't have the time to watch this. So if
 7 you're speaking on behalf of us, please check
 8 it yourself to make sure that what you said is
 9 accurate"?
 10 MS. BONNELL:
 11 A. Well, not your second half there. That's not
 12 what I was saying. But certainly, in terms of
 13 resource, that was raised and resources have
 14 been added to the Communications department to
 15 help alleviate the strain on the media
 16 relations position. Originally it was not a
 17 position, for example. It was shared
 18 responsibility, but within Eastern Health, it
 19 is a full-time position and there's some
 20 consideration now as to whether one position
 21 is going to be sufficient.
 22 MS. NEWBURY:
 23 Q. So in the fall of 2005 when there was some
 24 media coverage there, particularly involving
 25 Dr. Williams as a spokesperson for Eastern

Page 308

1 looking back at it, and I'll take you to a
 2 few, but was your general impression that
 3 things were more or less appropriate?
 4 MS. BONNELL:
 5 A. My general impression was that things were
 6 more or less good. There was a piece that was
 7 posted on the CBC website that was take--we
 8 discovered--I'll try and recall for you now.
 9 I remember that The Telegram did a very good
 10 piece. That we felt that The Independent was
 11 a fair piece, the story that it initially
 12 broke the story.
 13 MS. NEWBURY:
 14 Q. I guess I'm focusing on Dr. Williams' role in
 15 any of those reports.
 16 MS. BONNELL:
 17 A. Right, okay. So then Dr. Williams did another
 18 piece with VOXM, which we thought was good.
 19 There was a piece with the CBC that appeared
 20 initially that was clearly just taken from--we
 21 had made contact with the CBC and they hadn't
 22 done a piece, but then we corrected some
 23 errors that were brought to our attention in
 24 their piece and then subsequent to that, in
 25 later October, Dr. Williams did an interview

Page 309

1 with CBC. Dr. Williams did an interview with
 2 Out of the Fog late in October, I believe.
 3 There was also a piece in The Globe and Mail
 4 that Dr. Williams did.
 5 MS. NEWBURY:
 6 Q. But generally speaking, of those that you can
 7 recall now, was your general impression that
 8 these media reports were accurate, the
 9 statements attributed to Dr. Williams were
 10 accurate?
 11 MS. BONNELL:
 12 A. Generally, yes.
 13 MS. NEWBURY:
 14 Q. Can I have Exhibit P-0345 please? Page nine
 15 of the exhibit. This is a CBC news report for
 16 October the 14th 2005. Are you familiar with
 17 this particular report?
 18 MS. BONNELL:
 19 A. Yes, I believe so.
 20 MS. NEWBURY:
 21 Q. You can scroll down if you want to look at it.
 22 I'll just bring you down to paragraph ten.
 23 Paragraph ten there, right on the very bottom
 24 of the page, "Dr. Bob Williams, a vice
 25 president with Eastern Health, says 'it is

Page 311

1 MS. BONNELL:
 2 A. That they were being--that there were two
 3 planned in the fall of 2005.
 4 MS. NEWBURY:
 5 Q. And you don't know if they had already been
 6 there or not?
 7 MS. BONNELL:
 8 A. I believe that one was done the very last of
 9 September. Is that correct?
 10 MS. NEWBURY:
 11 Q. Yes.
 12 MS. BONNELL:
 13 A. And there was another one done in October or
 14 November.
 15 MS. NEWBURY:
 16 Q. Okay, and what about the Ventana
 17 representative checking the equipment in early
 18 August 2005?
 19 MS. BONNELL:
 20 A. Yes, I was aware that that had been done.
 21 MS. NEWBURY:
 22 Q. You were aware of that?
 23 MS. BONNELL:
 24 A. Yes.
 25 MS. NEWBURY:

Page 310

1 possible that some patients with the wrong
 2 test results may have benefited from the drug.
 3 An external review of the Authority's testing
 4 equipment will be done,' Williams said."
 5 MS. BONNELL:
 6 A. Um-hm.
 7 MS. NEWBURY:
 8 Q. Did you have any concerns with that statement?
 9 MS. BONNELL:
 10 A. No, I didn't.
 11 MS. NEWBURY:
 12 Q. You were aware at that point in time that
 13 there was already an external review of the
 14 testing equipment?
 15 MS. BONNELL:
 16 A. I was not, no, that that had been done at that
 17 point.
 18 MS. NEWBURY:
 19 Q. At this point in time.
 20 MS. BONNELL:
 21 A. No.
 22 MS. NEWBURY:
 23 Q. Okay. What was your understanding or your
 24 knowledge level at that time regarding any
 25 external reviews that were planned?

Page 312

1 Q. Okay. Do you know what Dr. Williams was
 2 referring to here?
 3 MS. BONNELL:
 4 A. I think he's referring to the external reviews
 5 being done of the laboratory, I think. It may
 6 be--it says testing equipment.
 7 MS. NEWBURY:
 8 Q. Do you have any concerns with the focus on
 9 testing equipment as opposed to broader
 10 issues, such as processes used or the skill
 11 level of technologists or pathologists
 12 involved in the testing?
 13 MS. BONNELL:
 14 A. No, I can't speak with any accuracy to what
 15 Dr. Williams may or may not have said to that
 16 reporter. It's not a direct quote. It's a
 17 paraphrase and I don't know what he said or
 18 what else he would have said at that time.
 19 MS. NEWBURY:
 20 Q. So you can't recall if either you or Ms.
 21 Pennell were there?
 22 MS. BONNELL:
 23 A. No, I can't. The only conversation I recall
 24 having with Dr. Williams about his interviews
 25 was about the ten percent issue, and the ten

Page 313

1 percent was referenced I think rather
 2 effectively in that initial piece he did with
 3 The Telegram, but then kind of got referenced
 4 in different ways in stories that fell out of
 5 that, and then was--became a point of
 6 contention this year and has certainly been
 7 reported that we indicated in December of 2006
 8 that we'd have a ten percent error rate and
 9 that kind of thing which we didn't, in fact,
 10 do, but it's one of those things. And I
 11 remember talking to Dr. Williams and saying to
 12 him, you know, just be careful about putting,
 13 even estimating what you think a percentage
 14 might be because we have no idea at this point
 15 how this is going to turn out.
 16 MS. NEWBURY:
 17 Q. And when did you talk to Dr. Williams about
 18 that?
 19 MS. BONNELL:
 20 A. After he did one of the stories.
 21 MS. NEWBURY:
 22 Q. Okay. Now, at the time, and I'm focusing now
 23 on the article in front of you, were you the
 24 person in the best position to monitor this
 25 given your level of knowledge and your

Page 315

1 stories. So Mr. Williams would have received
 2 a copy of this as would other members of our
 3 executive, so if there were issues in the
 4 stories that they had concerns with, they
 5 didn't raise them to me to the point of asking
 6 me to have retractions made.
 7 MS. NEWBURY:
 8 Q. When you refer these articles along, are the
 9 individuals that receive these articles
 10 actually requested to say, "Please read this.
 11 This is a technical issue. I'm not
 12 comfortable that I'm in the best position to
 13 comment on the accuracy or the completeness of
 14 the information there. Please have a look at
 15 it and respond to me one way or the other if
 16 you have any concerns."?
 17 MS. BONNELL:
 18 A. No.
 19 MS. NEWBURY:
 20 Q. Because I know a lot of e-mails might get
 21 forwarded around to people, they might just
 22 think it's of interest and if I get around to
 23 it -
 24 MS. BONNELL:
 25 A. No, I think -

Page 314

1 understanding of the issues and your
 2 understanding of the nature of the external
 3 reviews, were you the best person to be
 4 monitoring the accuracy of these reports?
 5 MS. BONNELL:
 6 A. I am the person who does that within the
 7 authority.
 8 MS. NEWBURY:
 9 Q. And to the extent that you might have limited
 10 knowledge to be able to correct perhaps an
 11 inaccuracy or to clarify something that might
 12 leave the wrong impression in someone reading
 13 this, you don't have any reservations about
 14 that or you're just saying that you're the
 15 best that they had to do this at the time?
 16 MS. BONNELL:
 17 A. I was the individual responsible for
 18 monitoring media, for providing media, for
 19 responding to media requests. It was all done
 20 within our department. I was also the person
 21 responsible for a lot of other things, Ms.
 22 Newbury, so, you know, there was definitely a
 23 resource issue for us. But part of monitoring
 24 stories like this, as well, is that you send
 25 them on to individuals who are part of these

Page 316

1 MS. NEWBURY:
 2 Q. - I'll read it, but are they actually focusing
 3 on -
 4 MS. BONNELL:
 5 A. I think in this -
 6 MS. NEWBURY:
 7 Q. - the goal at hand?
 8 MS. BONNELL:
 9 A. - particular case there was a lot of focus on
 10 the media coverage on October 18th and 19th
 11 and 20th, and in this period of time there was
 12 a significant amount of attention placed on
 13 this media coverage.
 14 MS. NEWBURY:
 15 Q. And did anyone following this October 14th,
 16 2005 media article, did anyone come back to
 17 you and say, "We have concerns about the
 18 comment attributed to Dr. Williams about the
 19 external review of the authority's testing
 20 equipment will be done and perhaps the
 21 impression that might be left in people's mind
 22 that the only thing that's being investigated
 23 is the equipment."?
 24 MS. BONNELL:
 25 A. No.

Page 317

1 MS. NEWBURY:
 2 Q. Okay.
 3 MS. BONNELL:
 4 A. But, ma'am, if you go up two paragraphs, "The
 5 health authority is still trying to figure out
 6 if the problem was caused by human error or
 7 faulty equipment."
 8 MS. NEWBURY:
 9 Q. Um-hm.
 10 MS. BONNELL:
 11 A. So that's there, as well, within this same
 12 story.
 13 MS. NEWBURY:
 14 Q. Page 2 of this document. This is an article
 15 October 5th, 2005, and this is talking about
 16 the percentage figures that were used by Dr.
 17 Williams. And this is in the Telegram. I'd
 18 like to refer you--first of all, are you
 19 familiar with this particular piece?
 20 MS. BONNELL:
 21 A. Yes. This is the one I've been referring to.
 22 MS. NEWBURY:
 23 Q. Okay, this is the one that you were happy
 24 with?
 25 MS. BONNELL:

Page 319

1 that particular description?
 2 MS. BONNELL:
 3 A. "Ten percent of the overall tests performed"
 4 is about right. If you consider the number of
 5 tests that we had returned at that point in
 6 time and the number of tests that were done in
 7 that period of time, it is about right. I
 8 mean, in actuality, you know, if you look at
 9 2760 tests and you say about 300 of them had
 10 changed results, it's about 10 percent. But
 11 of course, the problem with that is your
 12 denominator, correct? So, yes, Dr. Williams
 13 did say that and it is accurate. And I can
 14 see how you would indicate that it may be a
 15 cause for concern, but in October 5th of 2005
 16 we didn't have very many test results back at
 17 that point, either.
 18 MS. NEWBURY:
 19 Q. Okay. But -
 20 MS. BONNELL:
 21 A. So Dr. Williams was speculating, when pressed
 22 on the issue of percentage of overall tests
 23 performed, that's where he went with it. And
 24 I had a conversation with him after that
 25 article or perhaps the second one that he did

Page 318

1 A. That I thought was generally good, yes.
 2 MS. NEWBURY:
 3 Q. Now, if you look at the fourth column, the
 4 first and second paragraphs.
 5 MS. BONNELL:
 6 A. Yes.
 7 MS. NEWBURY:
 8 Q. Is that large enough print for you to read?
 9 MS. BONNELL:
 10 A. No, I can read it, yes.
 11 MS. NEWBURY:
 12 Q. Okay. "We had about 73 percent of tests that
 13 were positive, so we're only retesting the 27
 14 percent or so that were negative." And that's
 15 a quote attributed to Dr. Williams. And the
 16 next paragraph it's a comment attributed to
 17 him or I guess a summary. "And from these
 18 early results Williams said it appears only
 19 about 10 percent of the overall tests
 20 performed over the past seven years show
 21 different results."
 22 MS. BONNELL:
 23 A. At that point in time, yes.
 24 MS. NEWBURY:
 25 Q. Okay. And you didn't have any concerns with

Page 320

1 in which the 10 percent came up that I
 2 suggested that we probably shouldn't be
 3 talking about 10 percent.
 4 MS. NEWBURY:
 5 Q. Okay. Now, in this case here you feel that
 6 this is accurate, albeit, you're trying to
 7 predict somewhere off into the future, you
 8 don't know yet?
 9 MS. BONNELL:
 10 A. Right.
 11 MS. NEWBURY:
 12 Q. But and you're relying here on the overall
 13 tests performed over the past seven years, so
 14 that would be anyone in the past seven years,
 15 whether their results were ER negative or ER
 16 positive?
 17 MS. BONNELL:
 18 A. This was Dr. Williams speculating this
 19 himself.
 20 MS. NEWBURY:
 21 Q. Okay. So 10 percent of the 2700 or whatever
 22 figure they had in mind at the time?
 23 MS. BONNELL:
 24 A. Um-hm.
 25 MS. NEWBURY:

Page 321

1 Q. Were expected to show different results. And
 2 again, it's a bit of a crystal ball at that
 3 point?
 4 MS. BONNELL:
 5 A. Yes.
 6 MS. NEWBURY:
 7 Q. It's a bit of a guess on his part?
 8 MS. BONNELL:
 9 A. He's almost right in actuality bit -
 10 MS. NEWBURY:
 11 Q. Fair enough.
 12 MS. BONNELL:
 13 A. But it's a number that it can't really be
 14 talked about because the 2760 tests weren't
 15 redone, were they? It was just -
 16 MS. NEWBURY:
 17 Q. Well, and that's my next question for you.
 18 MS. BONNELL:
 19 A. Yeah.
 20 MS. NEWBURY:
 21 Q. This talks about only 10 percent will show
 22 different results.
 23 MS. BONNELL:
 24 A. Um-hm.
 25 MS. NEWBURY:

Page 323

1 MS. BONNELL:
 2 A. Yes.
 3 MS. NEWBURY:
 4 Q. - because we're not retesting all 2760?
 5 MS. BONNELL:
 6 A. We certainly talked like that, yes.
 7 MS. NEWBURY:
 8 Q. Okay. And you think that he understood the
 9 message that you were giving to him?
 10 MS. BONNELL:
 11 A. We never talked about it from that day
 12 forward.
 13 MS. NEWBURY:
 14 Q. Okay.
 15 MS. BONNELL:
 16 A. It may not have actually been this piece, Ms.
 17 Newbury, but it's stories around this time.
 18 So within that week you would have seen that
 19 repeated.
 20 MS. NEWBURY:
 21 Q. So once it was clear in his mind -
 22 MS. BONNELL:
 23 A. Yes, after that week -
 24 MS. NEWBURY:
 25 Q. - that there was a problem -

Page 322

1 Q. That would suggest that either you know that
 2 the ER positive tests would not show different
 3 results if they were retested or perhaps it
 4 might confuse some people as to whether or not
 5 they're retesting those. But how could you
 6 possibly know that the only different results
 7 would be in the figure, the 10 percent of the
 8 overall results if you're not retesting, if
 9 there's no plan to retest the ER positive
 10 patients?
 11 MS. BONNELL:
 12 A. We cannot.
 13 MS. NEWBURY:
 14 Q. Okay. And was that something that you focused
 15 on at the time?
 16 MS. BONNELL:
 17 A. I indicated to Dr. Williams that I thought he
 18 shouldn't be using the 10 percent figure.
 19 MS. NEWBURY:
 20 Q. did you explain to him that you shouldn't be
 21 using the 10 percent figure -
 22 MS. BONNELL:
 23 A. If we were only going to retest -
 24 MS. NEWBURY:
 25 Q. - because of the denominator -

Page 324

1 MS. BONNELL:
 2 A. After that week of stories that went away.
 3 See, this CTV News piece is actually a CP, so
 4 this is being taken from another story that he
 5 did, so this is not a--this is not multiple
 6 stories.
 7 MS. NEWBURY:
 8 Q. Okay.
 9 MS. BONNELL:
 10 A. This one, I think, is taken from the piece
 11 that might have ended up in the Globe.
 12 MS. NEWBURY:
 13 Q. And are you referring to the piece that's
 14 showing there now, page 4, CTV.ca?
 15 MS. BONNELL:
 16 A. Right, um-hm.
 17 MS. NEWBURY:
 18 Q. Okay. And paragraph 8. "Health care
 19 officials say they can't be precise about the
 20 number of people affected. Mount Sinai is
 21 testing 30 percent of the hundreds of tissue
 22 samples that came up negative since 1997. So
 23 far 10 percent of results have changed
 24 positive." Did you have any concerns that
 25 that may not be accurately describing -

Page 325

1 MS. BONNELL:
 2 A. Well, that's not accurate, is it?
 3 MS. NEWBURY:
 4 Q. Yeah. And it certainly would be easily
 5 interpreted by someone as being 10 percent of
 6 the results that are being retested are
 7 expected to convert, which is clearly wrong?
 8 MS. BONNELL:
 9 A. Right, yeah.
 10 MS. NEWBURY:
 11 Q. And the next page, this is CBC News. And if
 12 we look at paragraphs 9 to 11 down here at the
 13 bottom. Are you familiar with this particular
 14 piece?
 15 MS. BONNELL:
 16 A. Yeah, this -
 17 MS. NEWBURY:
 18 Q. Take your time and look through it.
 19 MS. BONNELL:
 20 A. I wonder is this the one after it was revised
 21 or before it was revised?
 22 MS. NEWBURY:
 23 Q. This one is dated October 6, so the very first
 24 one I showed you was dated October 5.
 25 MS. BONNELL:

Page 327

1 that we just looked a minute ago from CTV.ca?
 2 MS. BONNELL:
 3 A. Yes, that's right.
 4 MS. NEWBURY:
 5 Q. Now, page 10, now this is following week.
 6 Now, this is October 14, 2005, this is an
 7 interview and I think you alluded to this a
 8 little earlier, CBC Morning Show, Jeff
 9 Gilhooly. Are you familiar with this
 10 particular transcript?
 11 MS. BONNELL:
 12 A. I don't remember it, but I am familiar with
 13 it. I've read them all, but it's not--I don't
 14 remember the content of it without looking at
 15 it.
 16 MS. NEWBURY:
 17 Q. Now, page four of the transcript which is page
 18 13 of the exhibit, this is Mark Quinn, "health
 19 officials say that about 300 people from
 20 across Newfoundland and Labrador are given
 21 this test each year. Approximately three
 22 quarters of them test positive. So, hundreds
 23 of samples are being retested and Dr. Williams
 24 says they expect that less than 10 percent of
 25 those will turn out to false negatives".

Page 326

1 A. Yeah.
 2 MS. NEWBURY:
 3 Q. That one that we just looked at was October 6.
 4 MS. BONNELL:
 5 A. This is the revised CBC, there were two
 6 versions of the CBC piece.
 7 MS. NEWBURY:
 8 Q. Okay.
 9 MS. BONNELL:
 10 A. This is one after we asked them to correct
 11 something that was on the website.
 12 MS. NEWBURY:
 13 Q. Okay. And if you look down at paragraphs9
 14 through 11, "most of the tests performed in
 15 the Newfoundland facility were positive,
 16 Williams said. We are only retesting the 27
 17 percent or so that were negative. He said
 18 about 10 percent of tests done over the last
 19 seven years may show different results". And
 20 you're still uncomfortable with that, I take
 21 it?
 22 MS. BONNELL:
 23 A. Yes.
 24 MS. NEWBURY:
 25 Q. Is it not perhaps as misleading as the one

Page 328

1 MS. BONNELL:
 2 A. Um-hm.
 3 MS. NEWBURY:
 4 Q. And that certainly sounds or could easily be
 5 interpreted by someone as being 10 percent of
 6 results being retested are expected to
 7 convert.
 8 MS. BONNELL:
 9 A. This is where the 10 percent starts to creep
 10 on us.
 11 MS. NEWBURY:
 12 Q. Okay. Now -
 13 MS. BONNELL:
 14 A. Dr. Williams wasn't making that point anymore
 15 -
 16 MS. NEWBURY:
 17 Q. This something that Mr. Quinn is doing, but
 18 it's over a week later from the other reports.
 19 And you expressed already some discomfort with
 20 this and it seems to have certainly caused
 21 some confusion at some people here reporting
 22 had--they seemed to have reached the
 23 conclusion that 10 percent of those tests
 24 being retested are going to convert. Which is
 25 a much different number than those, than 10

Page 329

1 percent of the overall tests.
 2 MS. BONNELL:
 3 A. Yes.
 4 MS. NEWBURY:
 5 Q. Was anything done to correct that impression
 6 that has been left?
 7 MS. BONNELL:
 8 A. We did attempt to correct that impression with
 9 individual reports in the time period between
 10 that and the briefing whenever that 10 percent
 11 came up, yes.
 12 MS. NEWBURY:
 13 Q. And how was that done?
 14 MS. BONNELL:
 15 A. When we would see it in stories, occasionally
 16 we'd call some reporters to say that that was
 17 a prediction of Dr. Williams in October of
 18 2005, that we weren't standing by those
 19 numbers and we certainly didn't talk about 10
 20 percent when we did the briefing.
 21 MS. NEWBURY:
 22 Q. But it's more than just the fact that it's a
 23 prediction. The problem is that some people
 24 are left with a view that it's 10 percent of
 25 those tests being retested -

Page 331

1 A. It wasn't a focus for us, the 10 percent. It
 2 wasn't until 2007 when it became such an issue
 3 that it became a focus. It just wasn't a
 4 focus. Our focus was on doing the retests,
 5 getting the retests done, patient
 6 notification. It just wasn't the focus. I
 7 can give you no other explanation than that.
 8 MS. NEWBURY:
 9 Q. As someone skilled in communications, before
 10 that 10 percent figure was ever used, 10
 11 percent relating to the overall figure, do you
 12 think that a more direct approach, more
 13 straightforward description of the predictions
 14 of Dr. Williams would have been appropriate?
 15 Why not, if you're going to talk about
 16 percentages at all, why not relate it to those
 17 tests that are being redone as opposed to the
 18 overall group? Or why not just simply state a
 19 number as opposed to a percentage, just so as
 20 not to leave wrong impressions?
 21 MS. BONNELL:
 22 A. Yes, I agree with you that that would have
 23 been beneficial, but throughout the majority
 24 of 2006 we weren't saying very much about
 25 anything including correcting misinformation

Page 330

1 MS. BONNELL:
 2 A. Yes.
 3 MS. NEWBURY:
 4 Q. - are expected to convert. That's not what
 5 Dr. Williams was predicting at the time?
 6 MS. BONNELL:
 7 A. No, he wasn't, that's correct.
 8 MS. NEWBURY:
 9 Q. Okay, but some people reading this, reading
 10 these various media articles could be left
 11 with that impression.
 12 MS. BONNELL:
 13 A. Yes, that's correct.
 14 MS. NEWBURY:
 15 Q. And was any effort made on your website or
 16 through press release to make sure that the
 17 message got out there to anyone who's
 18 interested in reading media articles or
 19 following up on this, that that wrong
 20 impression be rectified?
 21 MS. BONNELL:
 22 A. No.
 23 MS. NEWBURY:
 24 Q. Okay. And why not?
 25 MS. BONNELL:

Page 332

1 about percentages.
 2 MS. NEWBURY:
 3 Q. But I'm talking about the very first delivery
 4 of the message. A decision was made that
 5 we're going to put Dr. Williams out there now
 6 and -
 7 MS. BONNELL:
 8 A. Well, there wasn't a total number at that
 9 time, Ms. Newbury. I mean, we didn't have
 10 total numbers in early October because there
 11 were still blocks coming in and being sent
 12 off. So, it's my recollection, at that time,
 13 that we weren't able to land on a total number
 14 that had actually been sent because there were
 15 still individual blocks being picked up and
 16 sent at that time.
 17 MS. NEWBURY:
 18 Q. But you do have enough to make a prediction.
 19 It can very well turn out to be wrong. My
 20 question is why not relate the percentage--if
 21 you're going to use a percentage all, to the
 22 actual testing being redone as opposed to the
 23 global tests?
 24 MS. BONNELL:
 25 A. I think Dr. Williams -

1 MS. NEWBURY:
 2 Q. From a communications perspective, I guess.
 3 MS. BONNELL:
 4 A. Dr. Williams was feeling press--I didn't want
 5 to talk about numbers at all. Dr. Williams
 6 was feeling pressured to put something--you
 7 know, there's always a pressure to put
 8 something in numbers, give categories, give
 9 percentages. And that's what he decided to
 10 do. My choice would have been no talk of
 11 numbers until we had numbers to give. So,
 12 until we could say, 2700, 6939, etcetera,
 13 etcetera, but those numbers weren't available
 14 to us in that straightforward way in October
 15 of 2005 when the story broke.
 16 MS. NEWBURY:
 17 Q. And was Dr. Williams aware that your
 18 preference would be not to use any numbers or
 19 percentages at all?
 20 MS. BONNELL:
 21 A. Yes.
 22 MS. NEWBURY:
 23 Q. Okay. If I could have Exhibit 0616, please.
 24 THE COMMISSIONER:
 25 Q. Ms. Newbury, it's about 5:00, so if you're

1 going to tell me that you're going to finish
 2 within the next few minutes, well fine -
 3 MS. NEWBURY:
 4 Q. I won't.
 5 MS. BONNELL:
 6 A. - but if you're not, I suggest we break for
 7 the day and you can continue in the morning.
 8 Do you want to give me a rough estimate?
 9 MS. NEWBURY:
 10 Q. Twenty minutes, half an hour perhaps.
 11 THE COMMISSIONER:
 12 Q. All right. We had hoped we could -
 13 MS. BONNELL:
 14 A. Me too.
 15 MS. BONNELL:
 16 A. - let you go today, but I'm afraid I'm going
 17 to have to ask you to come back in the
 18 morning. 9:30.
 19 Upon conclusion at 5:01 p.m.

1 CERTIFICATE
 2 I, Judy Moss, hereby certify that the foregoing is
 3 a true and correct transcript in the matter of the
 4 Commission of Inquiry on Hormone Receptor Testing,
 5 heard on the 2nd day of June, A.D., 2008 before the
 6 Honourable Justice Margaret A. Cameron,
 7 Commissioner, at the Commission of Inquiry, St.
 8 John's, Newfoundland and Labrador and was
 9 transcribed by me to the best of my ability by
 10 means of a sound apparatus.
 11 Dated at St. John's, Newfoundland and Labrador
 12 this 2nd day of June, A.D., 2008
 13 Judy Moss

Inquiry on Hormone Receptor Testing

<p style="text-align: center;">-?-</p> <p>' [3] 108:3,24 310:4</p> <p>'03 [1] 158:7</p> <p>'05 [5] 25:12 37:24 38:1 39:6 233:1</p> <p>'06 [5] 38:25 39:5 54:4 76:24 121:9</p> <p>'07 [8] 79:18 85:10,12 89:16 122:16 137:17 161:15 222:16</p> <p>'97 [1] 277:14</p> <p>'a [2] 108:2,24</p> <p>'goodwill' [1] 8:8</p> <p>'if [1] 107:25</p> <p>'it [1] 309:25</p> <p>'no [1] 104:22</p> <p>'screening' [1] 143:8</p>	<p>11:11 [1] 66:11</p> <p>11:30 [1] 34:2</p> <p>11:32 [1] 145:10</p> <p>11th [21] 5:20 6:18 8:5 11:16 13:11,13 17:23 21:21,24 26:7 29:1 41:6 41:13 42:13 56:6 60:4 66:8 68:9 73:13 99:8 119:16</p> <p>12 [1] 202:21</p> <p>1207 [2] 81:2,4</p> <p>12:30 [1] 143:25</p> <p>12:35 [1] 78:6</p> <p>12:43 [1] 141:21</p> <p>12:52 [1] 141:15</p> <p>12th [3] 13:13,17 295:17</p> <p>13 [5] 27:22 46:22 47:11 48:8 327:18</p> <p>13th [2] 165:2 235:12</p> <p>14 [1] 327:6</p> <p>148 [1] 27:15</p> <p>14th [2] 309:16 316:15</p> <p>15 [2] 85:16 305:20</p> <p>1508 [2] 202:19 203:21</p> <p>15th [7] 97:2,15 99:23 100:11 101:8 102:24 123:18</p> <p>16 [5] 25:12,17 26:1 237:1 237:12</p> <p>16th [7] 100:11 104:12 105:19 107:1 118:6 119:12 124:15</p> <p>17 [1] 75:5</p> <p>176 [1] 28:17</p> <p>177 [2] 2:3,4</p> <p>17th [2] 117:7 132:4</p> <p>18 [3] 6:2 12:7 180:17</p> <p>18th [10] 117:22 130:12 136:18 138:19 141:15 143:5 152:24 178:12 276:3 316:10</p> <p>19 [1] 236:16</p> <p>1997 [2] 279:1 324:22</p> <p>19th [1] 316:10</p> <p>1:00 [1] 45:4</p> <p>1:43 [1] 7:23</p> <p>1st [8] 6:17,21 11:16,21 181:15,22 182:11,25</p>	<p>179:13 181:15,22 182:11 182:25 183:11 184:13 201:13 233:6 234:2,12 235:2 249:17 276:3 277:14 285:22 295:3 300:8,23 306:23 309:16 311:3,18 316:16 317:15 319:15 327:6 329:18 333:15</p> <p>2006 [29] 5:14 6:15,24 7:4,22 17:24 26:7 33:9 36:1 44:15 56:6 64:18 66:8 81:18 119:20 121:18 121:23 127:2 146:4 191:15 193:1 222:16 233:12 234:5,6 235:3 293:23 313:7 331:24</p> <p>2007 [26] 78:2,6 85:16 87:20 101:9 102:24 107:1 119:12 126:13 130:12 132:4 136:18 138:14,19 141:15 145:25 146:3,14 151:1 154:18 165:2 202:21 235:12 244:11 253:12 331:2</p> <p>2008 [4] 1:4 91:22 335:5 335:12</p> <p>20th [1] 316:11</p> <p>21 [1] 230:14</p> <p>21st [7] 145:9,25 204:25 206:1,23 207:7 233:1</p> <p>22nd [13] 6:15,20 146:8 146:14 148:13 205:1 206:3 208:16 226:12 249:17 266:15 290:16 300:23</p> <p>23rd [13] 3:11,15 7:4,10 10:8,10,18 19:4 30:12 67:12 68:2 99:4 300:18</p> <p>240 [2] 2:4,5</p> <p>241 [2] 2:5,6</p> <p>24th [3] 6:24 10:6,7</p> <p>25 [5] 25:12 26:1 78:2,6 151:1</p> <p>25th [2] 150:19 300:18</p> <p>26th [1] 300:18</p> <p>27 [2] 318:13 326:16</p> <p>2700 [2] 320:21 333:12</p> <p>2760 [4] 51:2 319:9 321:14 323:4</p> <p>27th [7] 5:13 6:14 7:22 7:23 10:2,9 16:14</p> <p>2:42 [1] 8:3</p> <p>2:52 [1] 143:5</p> <p>2:57 [1] 121:18</p> <p>2nd [2] 335:5,12</p>	<p>317 [5] 26:23 27:4 28:10 32:13,17</p> <p>31st [1] 154:18</p> <p>334 [1] 2:6</p> <p>3:18 [1] 150:18</p> <p>3:34 [1] 145:25</p> <p>3:37 [1] 146:6</p> <p>3:56 [1] 101:9</p> <p style="text-align: center;">-4-</p> <p>4 [8] 124:25 162:21 208:2 223:14 266:21 269:3 287:23 324:14</p> <p>400 [1] 27:14</p> <p>42 [3] 28:11,24 29:4</p> <p>4:25 [2] 107:1 117:1</p> <p>4:44 [1] 119:12</p> <p>4:46 [1] 121:15</p> <p>4:57 [1] 124:15</p> <p>4th [2] 3:14 17:16</p> <p style="text-align: center;">-5-</p> <p>5 [4] 48:20 128:25 154:18 325:24</p> <p>50 [4] 23:4,5 24:4 48:20</p> <p>500 [1] 305:18</p> <p>5:00 [1] 333:25</p> <p>5:01 [3] 6:24 8:12 334:19</p> <p>5:06 [1] 143:22</p> <p>5th [2] 317:15 319:15</p> <p style="text-align: center;">-6-</p> <p>6 [5] 128:25 178:9 235:23 325:23 326:3</p> <p>600 [1] 305:18</p> <p>64 [1] 26:1</p> <p>6939 [1] 333:12</p> <p>6:21 [1] 121:23</p> <p>6:31 [1] 44:15</p> <p style="text-align: center;">-7-</p> <p>7 [1] 138:5</p> <p>709 [1] 143:23</p> <p>72 [1] 168:7</p> <p>72-hour [1] 170:3</p> <p>73 [1] 318:12</p> <p>763 [1] 28:10</p> <p>77 [1] 236:17</p> <p>78 [1] 236:20</p> <p>79 [1] 237:10</p> <p>7:09 [1] 130:13</p> <p>7:20 [1] 130:16</p> <p>7:53 [1] 104:12</p> <p>7:59 [1] 130:25</p> <p>7th [6] 33:9 36:1 40:19 40:22 42:5,12</p> <p style="text-align: center;">-8-</p> <p>8 [2] 138:8 324:18</p>	<p>80 [1] 237:19</p> <p>8:14 [1] 36:1</p> <p>8:45 [1] 40:19</p> <p>8:49 [1] 104:16</p> <p>8:52 [1] 56:5</p> <p>8:53 [1] 165:7</p> <p>8:56 [1] 102:24</p> <p>8:58 [1] 165:9</p> <p style="text-align: center;">-9-</p> <p>9 [4] 129:1 166:6 325:12 326:13</p> <p>939 [3] 26:23 31:22 50:24</p> <p>9:00 [1] 131:3</p> <p>9:06 [1] 131:24</p> <p>9:30 [1] 334:18</p> <p>9:50 [1] 66:8</p> <p>9th [4] 44:15 67:17,22 121:22</p> <p style="text-align: center;">-A-</p> <p>A's [4] 33:21 41:19 47:18 68:13</p> <p>A.D [2] 335:5,12</p> <p>a.m [15] 36:1 40:19 56:5 66:8,11 104:16,23 130:13 130:17,25 131:3,24 144:3 165:7 166:6</p> <p>Abbott [7] 3:14 8:14 17:17 141:15,24 154:8 250:24</p> <p>ability [8] 71:8 107:6 130:21 160:5 238:9 286:20 305:23 335:9</p> <p>able [24] 8:7 13:5 22:1 61:21 62:12,19 72:15 77:10 128:11 178:25 179:13,21 180:2 218:7 240:20,25 258:12 261:8 290:6 300:4 302:13 304:23 314:10 332:13</p> <p>above [2] 104:11 213:25</p> <p>absence [2] 126:5 207:15</p> <p>absent [1] 112:4</p> <p>absolutely [6] 26:22 30:10 109:11 153:23 163:23 230:5</p> <p>accept [1] 188:2</p> <p>acceptance [3] 118:17 119:1 218:8</p> <p>accepted [10] 72:19,21 72:24 208:20 216:21 217:3,7,11 218:9 219:3</p> <p>access [5] 85:19 90:8 229:9 254:16,19</p> <p>accessible [1] 93:22</p> <p>accommodate [1] 61:5</p> <p>accompanied [1] 140:25</p> <p>accomplish [3] 77:11 127:5 134:1</p> <p>according [1] 81:16</p> <p>accordingly [2] 44:8 86:3</p>
<p style="text-align: center;">---</p> <p>-because [1] 40:23</p> <p>-I [1] 161:24</p> <p style="text-align: center;">-0-</p> <p>0304 [1] 266:12</p> <p>0439 [1] 124:14</p> <p>05 [1] 230:14</p> <p>0616 [2] 273:6 333:23</p> <p>0826 [1] 119:11</p> <p>0832 [1] 131:23</p> <p>09 [1] 181:20</p> <p>0955 [1] 162:21</p> <p style="text-align: center;">-1-</p> <p>1 [4] 2:3 161:15 187:10 213:2</p> <p>1-2-3 [1] 235:25</p> <p>1-800 [3] 215:12 225:24 266:24</p> <p>1.6 [1] 235:23</p> <p>10 [30] 27:25 34:2 58:21 129:1 210:2 236:20 318:19 319:10 320:1,3 320:21 321:21 322:7,18 322:21 324:23 325:5 326:18 327:5,24 328:5,9 328:23,25 329:10,19,24 331:1,10,10</p> <p>100 [1] 112:25</p> <p>1000 [1] 270:5</p> <p>104 [3] 46:21 47:11 48:7</p> <p>10:35 [1] 85:16</p> <p>10th [5] 51:11,17 121:18 217:20 295:17</p> <p>11 [2] 325:12 326:14</p> <p>11.9 [1] 37:20</p> <p>11.97 [2] 36:9,10</p> <p>117 [18] 20:19 27:14 31:7 31:9 46:22 47:9 48:8,17 48:18,25 49:11 50:18,22 108:14 114:6,12,22 115:7</p>	<p style="text-align: center;">-2-</p> <p>2 [6] 1:4 78:22 137:24 268:1,2 317:14</p> <p>2,760 [2] 32:5 37:12</p> <p>20 [1] 304:17</p> <p>200 [1] 147:6</p> <p>2002 [1] 228:18</p> <p>2003 [6] 154:23 157:8,17 159:4,8 228:18</p> <p>2004 [1] 228:18</p> <p>2004/09/09 [1] 181:19</p> <p>2005 [35] 35:8 101:11,13 154:20 174:14 178:12</p> <p style="text-align: center;">-3-</p> <p>3 [12] 150:16,21 202:19 202:21,24 205:12 208:2 213:1,2 237:10 266:14 266:21</p> <p>30 [2] 27:25 324:21</p> <p>300 [4] 27:8,14 319:9 327:19</p> <p>30th [1] 174:14</p>	<p>317 [5] 26:23 27:4 28:10 32:13,17</p> <p>31st [1] 154:18</p> <p>334 [1] 2:6</p> <p>3:18 [1] 150:18</p> <p>3:34 [1] 145:25</p> <p>3:37 [1] 146:6</p> <p>3:56 [1] 101:9</p> <p style="text-align: center;">-4-</p> <p>4 [8] 124:25 162:21 208:2 223:14 266:21 269:3 287:23 324:14</p> <p>400 [1] 27:14</p> <p>42 [3] 28:11,24 29:4</p> <p>4:25 [2] 107:1 117:1</p> <p>4:44 [1] 119:12</p> <p>4:46 [1] 121:15</p> <p>4:57 [1] 124:15</p> <p>4th [2] 3:14 17:16</p> <p style="text-align: center;">-5-</p> <p>5 [4] 48:20 128:25 154:18 325:24</p> <p>50 [4] 23:4,5 24:4 48:20</p> <p>500 [1] 305:18</p> <p>5:00 [1] 333:25</p> <p>5:01 [3] 6:24 8:12 334:19</p> <p>5:06 [1] 143:22</p> <p>5th [2] 317:15 319:15</p> <p style="text-align: center;">-6-</p> <p>6 [5] 128:25 178:9 235:23 325:23 326:3</p> <p>600 [1] 305:18</p> <p>64 [1] 26:1</p> <p>6939 [1] 333:12</p> <p>6:21 [1] 121:23</p> <p>6:31 [1] 44:15</p> <p style="text-align: center;">-7-</p> <p>7 [1] 138:5</p> <p>709 [1] 143:23</p> <p>72 [1] 168:7</p> <p>72-hour [1] 170:3</p> <p>73 [1] 318:12</p> <p>763 [1] 28:10</p> <p>77 [1] 236:17</p> <p>78 [1] 236:20</p> <p>79 [1] 237:10</p> <p>7:09 [1] 130:13</p> <p>7:20 [1] 130:16</p> <p>7:53 [1] 104:12</p> <p>7:59 [1] 130:25</p> <p>7th [6] 33:9 36:1 40:19 40:22 42:5,12</p> <p style="text-align: center;">-8-</p> <p>8 [2] 138:8 324:18</p>	<p>80 [1] 237:19</p> <p>8:14 [1] 36:1</p> <p>8:45 [1] 40:19</p> <p>8:49 [1] 104:16</p> <p>8:52 [1] 56:5</p> <p>8:53 [1] 165:7</p> <p>8:56 [1] 102:24</p> <p>8:58 [1] 165:9</p> <p style="text-align: center;">-9-</p> <p>9 [4] 129:1 166:6 325:12 326:13</p> <p>939 [3] 26:23 31:22 50:24</p> <p>9:00 [1] 131:3</p> <p>9:06 [1] 131:24</p> <p>9:30 [1] 334:18</p> <p>9:50 [1] 66:8</p> <p>9th [4] 44:15 67:17,22 121:22</p> <p style="text-align: center;">-A-</p> <p>A's [4] 33:21 41:19 47:18 68:13</p> <p>A.D [2] 335:5,12</p> <p>a.m [15] 36:1 40:19 56:5 66:8,11 104:16,23 130:13 130:17,25 131:3,24 144:3 165:7 166:6</p> <p>Abbott [7] 3:14 8:14 17:17 141:15,24 154:8 250:24</p> <p>ability [8] 71:8 107:6 130:21 160:5 238:9 286:20 305:23 335:9</p> <p>able [24] 8:7 13:5 22:1 61:21 62:12,19 72:15 77:10 128:11 178:25 179:13,21 180:2 218:7 240:20,25 258:12 261:8 290:6 300:4 302:13 304:23 314:10 332:13</p> <p>above [2] 104:11 213:25</p> <p>absence [2] 126:5 207:15</p> <p>absent [1] 112:4</p> <p>absolutely [6] 26:22 30:10 109:11 153:23 163:23 230:5</p> <p>accept [1] 188:2</p> <p>acceptance [3] 118:17 119:1 218:8</p> <p>accepted [10] 72:19,21 72:24 208:20 216:21 217:3,7,11 218:9 219:3</p> <p>access [5] 85:19 90:8 229:9 254:16,19</p> <p>accessible [1] 93:22</p> <p>accommodate [1] 61:5</p> <p>accompanied [1] 140:25</p> <p>accomplish [3] 77:11 127:5 134:1</p> <p>according [1] 81:16</p> <p>accordingly [2] 44:8 86:3</p>	

<p>account [1] 46:22 accountability [1] 114:25 accountable [1] 108:15 accuracy [5] 161:1 303:5 312:14 314:4 315:13 accurate [14] 19:9 26:24 27:11 29:5,9,10 160:13 303:14 306:9 309:8,10 319:13 320:6 325:2 accurately [1] 324:25 achieve [1] 270:20 achieved [1] 290:15 achieving [1] 270:21 acknowledge [4] 21:3 46:9 52:9 230:25 acknowledged [2] 182:23 222:25 acknowledgement [1] 114:20 acknowledges [1] 121:20 acknowledging [1] 66:10 act [2] 77:22 229:21 acted [3] 44:8 212:22,24 acting [1] 108:9 action [16] 1:13 20:23 35:3 65:3 67:11 71:7 87:25 88:10 105:3 106:5 108:20 140:3 152:21 233:10 234:7 243:8 actions [2] 35:8 211:9 active [1] 151:18 actively [1] 174:9 activities [4] 55:9,13 88:5 284:11 actual [9] 4:11 40:1,5 59:21,22 60:4 92:5 199:25 332:22 actuality [2] 319:8 321:9 acute [1] 261:1 ad [8] 160:4,16,19 161:3 162:10 277:23 278:2 279:23 adamant [2] 153:17,21 adapted [1] 248:1 add [1] 19:23 added [1] 306:14 adding [1] 45:6 address [7] 84:20 136:21 141:1 150:1 225:11 269:5 277:21 addressed [2] 139:15 192:2 addressing [1] 141:3 adequate [1] 307:1 administration [2] 159:4 213:11 administrative [3] 159:16 180:15,18 administrators [1] 55:23</p>	<p>admit [1] 165:17 admitted [1] 237:16 admitting [1] 108:17 Adophilia [1] 165:14 ads [2] 170:8 280:13 advance [4] 8:8,22 11:1 13:4 advanced [6] 9:7 10:23 14:8,19 15:8 130:21 adverse [16] 180:21 184:4,5,24 185:14,16 186:19 187:9,14,23 281:21 282:18 283:22 284:14 285:18 286:15 advertisement [5] 161:19 219:21 277:22 280:9 282:23 advertising [2] 276:7 282:10 advice [24] 44:8 71:21 102:7 129:4 168:17 224:23,23 232:6,12,15 264:5 265:4,21,22 268:4 268:7,8,10,24 280:6,16 281:13 286:20 296:23 advisable [1] 241:19 advise [5] 86:3 87:11 223:24 264:6 268:18 advised [2] 81:14 103:5 advising [2] 226:12 231:24 advisor [1] 229:22 advocating [3] 109:8,11 225:20 affected [4] 221:13,18 231:24 324:20 affidavit [12] 30:3 90:15 91:2,3 92:9,11,12 94:9 94:18 98:8,9,12 affidavits [2] 93:22 138:13 affiliated [2] 260:20,23 afraid [3] 43:12 166:11 334:16 aftermath [2] 65:23 70:3 afternoon [12] 22:2 33:24 34:20 62:13 66:16 85:18 117:1 123:21 239:24 240:5 241:10,12 afterward [5] 65:16 66:23,24 69:21 134:18 afterwards [3] 63:14 216:20,21 again [29] 23:23 29:21 39:22 45:1 89:17 93:25 119:8 121:7,14 124:14 130:18 141:8 145:24 149:4 165:12 172:5 194:20 201:12 210:3 215:10 219:2 223:15 227:23 241:1 269:7 279:4 279:22 304:9 321:2 against [4] 72:4 223:24 226:12 256:7 agenda [5] 33:13 41:16 43:1 61:11 244:5</p>	<p>ago [4] 20:15 81:15 228:23 327:1 agree [16] 183:1 192:3 196:9 212:23 213:8,14 235:3 238:5,10 269:10 273:22 294:6 296:1 297:1 297:10 331:22 agreed [7] 15:11 32:19 153:23 204:4 232:22 255:21 297:1 agreement [6] 11:10 173:18 177:18,21 203:17 208:8 ahead [7] 22:9 62:10 92:1 168:10 201:23 228:14,15 al [1] 1:9 albeit [1] 320:6 allegations [2] 103:9 107:17 alleviate [1] 306:15 allied [1] 187:20 allow [2] 108:16 240:23 allowed [1] 93:12 allowing [2] 72:14 108:21 alluded [1] 327:7 almost [5] 49:17 180:7 207:6 307:7 321:9 alone [3] 14:5 15:3 76:17 along [10] 14:7 40:20 64:23 86:24 144:5 221:4 245:11 253:18 274:19 315:8 altogether [1] 51:6 always [17] 55:17 111:20 113:5 115:12 127:1 163:11 200:10 201:18 203:12 204:25 216:12 271:3 272:16,18,21 303:13 333:7 amendments [1] 217:11 among [4] 205:14 229:14 229:17 257:2 amongst [6] 107:23 115:18 147:22 212:16 218:21 259:4 amount [4] 53:15 113:25 289:9 316:12 ample [1] 21:12 analysis [1] 172:20 anger [1] 110:21 angle [2] 166:11,14 angry [1] 110:23 announcement [4] 183:13 214:2,16 215:2 annual [2] 210:24 257:17 answer [10] 114:23 132:8 157:9,13 191:4 218:6 231:18 234:24 263:7 279:20 answered [2] 231:3,13 answering [1] 272:11 answers [1] 74:16</p>	<p>antibodies [1] 54:25 anticipate [3] 64:18 65:22 100:1 anticipated [10] 5:1 11:14 18:19 34:14 53:22 64:17 72:12 97:22 135:1 176:2 anticipating [2] 64:15 133:1 anticipation [1] 45:3 antigens [1] 76:7 anxiety [3] 109:2 231:1 232:13 anybody's [1] 212:19 anyway [13] 13:25 24:10 64:14 68:13 83:23 102:20 166:1 174:8 181:10 187:11 202:2 205:13 232:23 anyways [1] 46:18 apart [1] 287:6 apologies [2] 189:19,25 apologize [9] 40:25 41:10 57:9 59:24 66:9 78:1 150:17 160:7,13 apologized [1] 78:20 apparatus [1] 335:10 apparent [1] 142:2 appear [8] 83:25 103:7 104:6 193:20 229:6 236:13 268:9 280:6 appearance [2] 173:6 174:1 Appearances [1] 1:5 appeared [2] 223:17 308:19 appearing [2] 192:13 203:12 apply [2] 183:15 247:24 appointment [1] 183:13 appraisal [1] 202:20 appreciate [7] 44:13 68:23 115:4,5 130:23 133:25 302:13 appreciative [1] 141:4 approach [9] 15:7 46:14 52:19 97:12,14 208:10 255:17 294:7 331:12 approached [2] 127:3 237:15 approaches [1] 133:15 appropriate [9] 167:9 171:6 189:19 190:16 200:11 225:14 274:15 308:3 331:14 appropriately [1] 187:22 approve [1] 199:10 approved [2] 199:7,13 April [2] 87:21 127:12 area [7] 196:3,13 259:23 260:24 261:3 268:11,23 areas [2] 242:2 261:7 argue [3] 12:18 30:7</p>	<p>88:22 argued [2] 30:3 151:17 arise [2] 194:9 195:13 arising [1] 233:18 arithmetic [5] 25:6 28:9 36:8,8 37:1 aromatase [4] 18:13 27:20 48:3 64:12 arose [1] 27:12 arrange [2] 6:17 49:25 arranged [2] 128:7 143:23 arrangements [1] 188:16 arranging [2] 128:4,6 arrived [3] 28:25 81:17 154:1 article [5] 12:23 313:23 316:16 317:14 319:25 articles [4] 315:8,9 330:10,18 ASAP [2] 145:13 160:9 aside [6] 71:18,20 227:14 238:12 246:8 265:1 asks [3] 6:4 7:24 237:14 aspect [2] 218:2 267:6 Assembly [4] 66:16 123:7 146:16 154:22 assert [1] 44:5 assessing [1] 152:9 assessment [4] 104:7 222:21 243:21 244:1 assist [6] 37:23 101:19 102:3 137:13 203:4,20 assistance [3] 128:2,21 252:18 assisted [2] 128:17 252:9 associate [1] 128:17 associated [1] 85:22 associations [2] 173:25 174:9 assume [3] 188:2 245:13 277:11 assumed [2] 77:14 263:11 assumes [1] 107:15 assuming [2] 34:22 107:24 assumption [1] 263:13 Atlantic [1] 296:15 attached [5] 33:16 35:17 119:15 277:16 278:3 attaches [1] 276:7 attachment [3] 44:25 141:17,20 attachments [1] 33:12 attempt [10] 4:4 19:6 132:18 165:20 226:23 279:20 292:12,16 295:4 329:8 attempted [4] 141:7 231:20 307:8,19 attempting [2] 8:14</p>
---	--	---	--	---

<p>228:5 attempts [2] 126:25 292:19 attend [3] 52:3 139:3 217:17 attended [4] 51:15,24 149:1 235:11 attende [1] 235:16 attending [1] 255:14 attention [9] 5:16 159:6 164:9,11 180:7 184:13 307:25 308:23 316:12 attentions [1] 147:10 attribute [1] 15:3 attributed [7] 6:7 303:25 307:3 309:9 316:18 318:15,16 audience [2] 221:7 279:23 audiences [1] 167:18 auditing [1] 219:23 auditorium [1] 148:19 August [8] 20:15 181:15 181:22 182:11,24 295:3 295:17 311:18 authorities [5] 1:16 182:7 190:17 236:24 296:14 authority [8] 1:11 132:19,23 167:15 180:22 302:21 314:7 317:5 authority's [2] 310:3 316:19 automatically [3] 107:15,24 288:5 available [9] 6:19 34:19 61:23 128:16 212:5 234:17 277:2 278:24 333:13 average [1] 305:18 aware [43] 10:21 29:24 39:4,10 66:3 67:5 68:10 69:1 70:12,20 75:18 76:6 89:25 90:17,19 93:23,25 123:7 125:10,14 142:1 154:12 155:3,5,22 178:25 190:14 200:21 202:8 205:15,16 225:17 246:9 251:15 274:10 282:8 285:6,21,24 310:12 311:20,22 333:17 away [9] 5:7 102:8 129:10,10 211:10 272:9 272:23 295:19 324:2 awful [1] 205:16 axe [1] 107:19</p>	<p>badly [1] 227:1 balance [5] 72:14 73:7 73:10 270:14,19 balanced [1] 73:8 ball [2] 142:17 321:2 Banerjee [1] 234:10 Banerjee's [1] 75:1 banging [1] 20:4 Barb [1] 63:5 Barrett [4] 89:21 96:9 116:9,11 Barrington [11] 6:23 7:22,24 18:19 24:17 33:11 39:24 44:17 66:12 66:21 78:8 based [9] 38:15 65:22 226:13 227:5 228:10 250:17 288:17 292:1 297:6 basis [15] 123:11 160:8 177:1 196:19 199:12 210:24 212:22,23 237:15 255:5 256:5 272:1,2 288:11 291:11 batch [1] 25:22 bear [1] 199:1 bearing [1] 73:15 beat [2] 108:11 111:14 became [8] 140:22 148:8 217:16 252:17 273:17 313:5 331:2,3 become [8] 77:1 90:19 123:19 137:7 155:20 166:16 176:11 237:23 becomes [1] 176:10 becoming [1] 125:10 beforehand [1] 11:9 began [3] 25:2 27:5 42:8 begin [4] 35:1 167:3 240:10 295:23 beginning [3] 11:15 34:2 61:19 begins [2] 167:20 213:18 begun [1] 222:3 behalf [2] 239:3 306:7 belief [4] 74:6 118:18 179:11 180:11 below [2] 121:22 168:4 beneficial [3] 128:13 253:24 331:23 benefit [8] 49:23 216:22 217:4 218:10 219:5 222:10,17 225:21 benefited [1] 310:2 Bernard [3] 1:6 2:3 3:3 best [18] 108:10 120:4 182:1 209:12,25 211:2 212:21 243:3 245:14 261:5,8 297:14,17 313:24 314:3,15 315:12 335:9 better [19] 72:14 73:7,10 74:11 76:2 82:2 104:22 168:25 169:2,5 237:6,13 238:11,24 239:24 249:10</p>	<p>257:17 284:5 290:12 between [35] 3:13 8:15 9:2 24:12 35:15 40:22 41:5 42:21 66:25 72:14 123:5 124:4,7 145:8,24 149:7 158:16 208:25 209:16 211:20 213:11 226:21 227:25 246:25 262:13 263:1 265:25 269:23 270:14 271:1 272:10 277:14 282:12 283:15 329:9 Beverley [2] 236:10,15 beyond [3] 69:2 110:20 126:21 big [6] 123:6 142:7 161:24 203:13 244:6 245:16 bigger [1] 168:10 Bill [4] 102:24 103:13 104:14 171:24 binder [1] 251:21 bit [15] 18:6 24:8 39:22 89:23 92:23 95:15 151:15 241:18 261:6 264:2 290:4 301:6 321:2,7,9 bits [1] 123:3 black [2] 210:12 288:1 blame [1] 111:2 blaming [1] 109:3 blew [1] 247:17 blocks [2] 332:11,15 blood [1] 210:16 bluntly [1] 75:24 board [10] 101:10 102:15 102:20 104:13 152:6 154:19 159:23,24 160:6 171:9 Board's [1] 243:25 Bob [1] 309:24 body [1] 276:15 bold [1] 189:10 bolded [1] 36:10 Bonnell [891] 2:2 3:3,6,7 3:10,17,24 4:13,22 5:4 5:21 7:6,11 8:18,20 9:15 9:24 10:3,13,19 11:11 11:17,22 12:1,12,17 13:12,19 14:6,11,15,22 15:1,9,14,24 16:4,9,15 16:19,23 17:2,8,12,18 17:25 22:14 23:1,7,14 23:18 24:1,6 25:7,14,18 25:23 26:3,11,15,19 27:2 28:6,12,16 29:2,12,16 30:9,13,17,24 31:5,10 31:16,23 32:2,9,15 33:5 34:6,10,15 36:13,18 37:4 37:25 38:5,9,19 39:1,7 39:11,16,21 40:11 41:1 41:7,18,24 42:4,10,23 43:9,21 44:1,9,21 45:12 45:17 46:1,6,11 47:2,7 47:14 48:10,22 49:1,8 49:12 50:7,11,16,23 51:3 51:7,12,16,20 52:6,11 52:15,22 53:5,11,20,24</p>	<p>54:5,12,19 55:11,16,22 56:9,13,17,21 57:1,15 57:20 58:3,7,12,18,22 59:4,9,16 60:7,11,18 61:2,10 62:24 63:4,15 63:21 64:7 65:9,19,25 66:18 67:2,9,15,23 68:3 68:7,16,20 69:6,11,16 69:24 70:5,9,16,22 71:1 71:5,14,25 72:8,25 73:4 73:20,24 74:5,22 75:2,6 75:17,25 77:5,12,19 78:12,25 79:19 80:2,8 80:12,20 81:9 82:1,10 83:8,14,21 84:13,17,25 85:6,11,17 86:7,11,17 86:22 87:3,10,22 88:7 88:16 89:4,8,12,18 90:5 90:9,21,25 91:7,11,15 91:19,23 92:2,16,21 93:2 93:6,11,15,20 94:6,10 94:15,25 95:5,12 96:1,8 96:13,18,24 97:3,16,25 98:6,13,24 99:5,11,17 100:2,13,18 101:14,21 101:25 102:12,17 103:18 103:22 104:2,8 105:10 105:24 106:4,10,14 109:10,16,23 110:24 112:22 113:14 114:13,17 114:24 115:9 116:4,8,16 116:23 117:3,9,13,18,23 118:2,7,14 119:17,22 120:1,7,14,23 121:4,10 122:1,6,10,17,21 123:1 123:22 124:6,21 125:12 125:19 126:12 127:16 128:23 129:22 130:10 131:5,12,17 132:1,5,13 132:17 133:7,16 134:3 134:10,14,20,25 135:6 135:14 136:8,20 137:3,9 137:19 138:2,9,16,21 139:5,11,16,21 140:13 140:17 142:5,11,15 143:13,17 144:7,21,25 145:4,16,20 146:9,17,22 147:4,14,21,25 148:16 148:23 149:12,17,21,25 150:6,11,23 151:4,9 152:2,7,12,16 153:5,15 153:22 154:9,14,25 155:4 155:8,12,16,21,25 156:9 156:17 157:3,10,18,23 158:2,8,19,24 159:9,13 160:2,12,20 161:2,7,21 162:5,12,17,24 163:6,16 163:21 164:1,8,14,19,23 165:4 166:15,23 167:5 167:10 168:14,18,23 169:12,17,21,25 170:5,9 170:13 171:1,5,13,17,25 172:4,11,24 173:3,8,12 173:16,21 174:3,19 175:1 175:16,21 176:4 177:23 178:9,15,21 179:3,7,15 180:3,10 181:1,6,11,16 181:24 182:19 183:2,19 184:16,23 185:6 186:5 186:10,23 187:6,15,24 188:4,11,22 189:4,13,20 190:1,9,21 191:1,6,20 192:4,10,14,18 193:5,12</p>	<p>193:16 194:6,11,19 195:1 195:5,10,17,21 196:22 196:23 197:3,7,13,21 198:1,6,10,14,18 199:8 199:14 200:4,13,18,25 201:5,10,19,24 202:10 202:15,20 204:23 205:6 205:23 206:4,11 207:12 207:17,21 208:3,17,22 209:2,24 211:19,25 212:13 213:13,20 214:4 214:10,21 215:7,10,16 216:1,6,16,19,25 217:5 217:12 218:3,12,18,24 219:7,12,17 220:7,13,23 221:9,14,21 222:1 223:6 223:11,19 224:1,6,13,17 224:25 225:7 226:16 227:2,22 228:7 229:11 229:16,20 230:1,11,19 231:4,15,19 232:3,8,17 233:3,13,23 234:3,13,20 235:1,13,17 236:6 238:4 239:5,13 241:8,10,11,23 242:3,7,12,17 243:16,24 244:25 245:5,17,24 246:5 246:13,21 247:3 248:2,8 248:13 249:5,12,22 250:1 250:7,13 251:7,12,18,23 252:2,6,20 253:1,5,11 254:17,23 255:2,6 256:2 256:8,17,23 257:8,14 258:3,9,15,21,25 259:15 259:19 260:1,9,17,22 261:11,19,24 262:6,16 263:3,10,15,21 264:11 264:15 265:6,15 266:9 266:17 267:3,12,18,23 268:14,19,25 269:12,17 269:21 270:10 271:10 272:4,17 273:13,19 274:2 274:7,21,25 275:6,13 276:8,12 277:8,15,17,24 278:4,8,14 279:6,15 280:2,10 281:1,6,15,23 282:3,7 283:7,13 284:15 284:19 285:3,12,19 286:4 286:16,23 287:8,17 288:16 289:23 290:8,25 291:6,13,21 292:3,11,23 293:5,14 294:12,25 295:11 296:3,12,22 297:12,20,25 298:6 299:5 299:15,20 300:13 301:3 301:14,22,25 302:5,12 303:7,12 304:3,10,21 305:8,12,17,25 306:10 307:4,13,17 308:4,16 309:11,18 310:5,9,15,20 311:1,7,12,19,23 312:3 312:13,22 313:19 314:5 314:16 315:17,24 316:4 316:8,24 317:3,10,20,25 318:5,9,22 319:2,20 320:9,17,23 321:4,8,12 321:18,23 322:11,16,22 323:1,5,10,15,22 324:1 324:9,15 325:1,8,15,19 325:25 326:4,9,22 327:2 327:11 328:1,8,13 329:2 329:7,14 330:1,6,12,21 330:25 331:21 332:7,24 333:3,20 334:5,13,15</p>
<p>-B-</p>				
<p>b [5] 46:16 108:18 223:15 223:16 287:23 backed [1] 110:13 background [4] 64:10 242:21,21 284:13 bad [7] 61:3 103:7 104:5 107:14 108:3,3,5</p>				

<p>Book [1] 173:6 booking [1] 34:1 booklet [1] 257:16 booklets [3] 257:4,12,13 Boone [13] 43:25 44:4 44:18 52:2 71:18 95:7,7 104:24 191:25 192:1,2 192:13 224:14 boss [1] 110:7 bosses [1] 115:7 bother [1] 62:7 bothers [1] 110:16 bottom [11] 7:14 78:23 127:1 130:11 178:19 187:18 215:10 226:16 277:21 309:23 325:13 bow [1] 113:3 Boyd [4] 102:24 103:16 103:21 104:14 Boyd's [1] 104:13 branch [4] 8:10 9:12 14:1 144:14 break [9] 95:22 102:16 106:23 114:3 177:13,14 239:24 240:5 334:6 breast [26] 1:12 6:6 49:19 115:17 141:7,18 142:23 143:1,7 151:5 163:2 172:15 222:11 236:22 267:16 274:15 276:21 277:3 278:19 279:11,24 286:8 304:11 304:12,12,18 breathes [1] 245:9 brief [4] 6:16,21 24:12 98:18 briefed [1] 117:8 briefing [103] 3:11,15 3:20 4:1 5:20 7:25 8:2 8:22,25 9:7,20,21 10:23 10:24 11:2,20 12:22,24 13:4,7,9,18 14:8,17,18 14:19 15:8 16:10 17:15 17:24 18:2,9 19:3 21:21 22:5 23:23 24:21,22 26:7 29:1 31:19 32:23 33:13 33:14,25 34:2,20 35:1 38:23 39:5,20 40:4 41:16 41:17 47:20,24 53:21 61:1 62:13 64:15,19 65:2 67:1 68:8 76:4 113:16 115:13 117:12 120:11 128:4,5 130:8,14,15 131:7,25 132:4,8 134:8 136:18 138:23,24 139:4 139:20 144:4 145:12 146:5,7,10,16 147:6,17 148:13,14,25 167:15 171:22 226:5 234:6 293:22 295:2 329:10,20 briefings [4] 8:4 18:10 34:1 66:14 briefly [1] 244:9 bring [16] 5:15 6:13,22 9:17 37:22 45:5 156:21 161:13 165:21 169:5 180:6 229:5 259:9,10</p>	<p>297:8 309:22 bringing [2] 222:11 271:16 Bristol [12] 127:8,19 137:2,4,13 153:13,17,20 160:2,21 168:15 169:11 broad [2] 249:4 265:7 broadcast [1] 7:10 broader [4] 167:25 254:15,18 312:9 brochure [2] 257:18 258:2 broke [6] 96:3 97:4 123:17,24 308:12 333:15 brought [5] 156:23 164:11 272:8 307:24 308:23 budget [2] 178:3 243:10 building [1] 117:17 builds [1] 237:4 built [1] 264:6 bullet [6] 107:21 108:21 110:18 114:7 163:13 172:19 bullets [2] 110:17 163:10 bulleted [3] 209:1 213:2 213:16 bullies [1] 107:18 bunch [1] 210:19 Burin [5] 145:21 171:20 243:20 244:1,8 business [1] 221:19 Bussey [2] 44:18 71:18</p>	<p>288:12 290:22 322:12 capable [3] 291:25 292:21 294:11 capture [1] 212:15 care [27] 35:16 62:6,23 107:7 165:24 168:1 182:9 185:8 189:15 190:13,14 193:6,11,19 237:21 247:12 257:6,9,11 261:1 261:16 282:17 283:16,21 284:7,21 324:18 careful [2] 213:3 313:12 caregiver [1] 186:2 Carolyn [4] 127:18,20 128:15 175:4 carry [1] 299:23 case [35] 18:11 81:23 84:7 88:22 90:1,16 103:12 113:20 115:1 119:14 136:11 151:15 176:6,18 177:22 182:8,22 185:11 204:20 213:25 214:23 215:15,22 224:14 225:11 228:20 230:7,9 250:4 269:6 270:1,3 304:16 316:9 320:5 cases [2] 35:14 275:14 categories [1] 333:8 category [3] 101:13 187:14 210:15 Cathy [3] 128:17 129:15 129:18 causation [2] 139:15 233:19 causative [13] 18:22 20:24 21:2 22:22 35:11 62:16 67:7 68:19 74:8 106:3,6 152:22 234:4 caused [7] 27:6 54:14 65:7 118:13 184:18 317:6 328:20 causes [6] 65:8 70:14 71:23 73:17 74:3 303:18 causing [1] 108:24 cautions [1] 4:20 caveat [2] 177:8,10 CBC [27] 7:3 10:7,10 21:15,16,20 34:3 98:7 101:8 103:4 140:19,20 156:21,22 157:2 165:7 166:1 173:6 308:7,19,21 309:1,15 325:11 326:5,6 327:8 CBC's [1] 170:21 cell [1] 145:15 central [2] 1:15 144:13 centralized [1] 253:21 Centre [1] 34:23 CEO [2] 229:10 235:23 certain [6] 36:7 40:20 67:5 72:19 104:17 182:15 certainly [73] 3:18 4:17 24:13,20 29:9,23 31:17 32:25 38:20,22 43:11,22 47:19 63:16 68:11 69:12 71:6 72:21 88:17 99:12</p>	<p>102:13,18 114:21 116:11 123:23,23 142:6 151:16 164:2 166:1 175:3,17 179:16 184:3 186:24 187:2 195:11 196:8 198:24 199:9 200:5 202:2 205:9 207:4 208:4 215:8 222:6 229:12 234:21 248:18 253:20 255:21 257:16 260:2 263:16 265:16 269:10 270:6 280:5 283:17 285:20 288:19 289:6 290:15 305:9 306:12 307:5 313:6 323:6 325:4 328:4,20 329:19 certainty [1] 51:21 Certificate [2] 2:7 335:1 certification [1] 183:12 certified [2] 87:25 140:5 certify [1] 335:2 chain [1] 96:6 challenge [2] 167:16 168:10 challenged [1] 172:23 challenges [1] 64:10 change [25] 8:19 19:24 23:13 27:24,24 29:19 31:12 40:22 41:4 42:8 43:2 45:9 46:19,23 47:22 57:25 82:11,14 115:12 228:20 294:20 295:10 296:1 298:10,17 changed [27] 20:17 21:7 25:17 27:3 42:21,21 43:1 43:3 46:21 47:12,22 48:18,21 58:11 82:5 146:4 208:25 245:10 255:8 295:14 298:5,19 299:2,9,11 319:10 324:23 changes [6] 20:21 22:23 59:14 61:6 62:17 147:8 changing [1] 47:24 Chaplin [2] 127:18 174:23 characterize [1] 110:3 charged [2] 39:19 143:11 chase [1] 303:15 Chaytor [2] 1:7 236:22 check [4] 81:21 183:14 204:13 306:7 checking [1] 311:17 Cheeseman [1] 141:21 Ches [2] 105:2 107:13 Chesley [3] 1:12 2:4 177:23 children [1] 113:6 choice [11] 209:15 211:19 215:14,22 216:3,10 226:21 227:1,20,25 333:10 choose [1] 132:20 chose [3] 69:2 130:6 250:20 chosen [1] 13:2 Chris [1] 5:17</p>	<p>chronology [1] 138:15 circulated [1] 256:20 circulating [1] 212:16 circumstances [2] 76:12 84:10 City [1] 127:8 civil [1] 220:18 clarification [2] 105:4 143:6 clarified [1] 94:17 clarify [8] 34:24 136:21 143:12 161:22,23 175:24 269:22 314:11 clarity [1] 105:15 class [15] 1:13 20:23 35:3 65:3 67:11 71:7 87:25 88:10 105:3 106:5 140:3 152:21 233:10 234:7 238:1 clause [1] 42:16 clear [12] 36:6 73:13 125:23 159:25 250:14 262:13,24 263:8 265:25 270:25 272:6 323:21 clearer [2] 255:19,19 clearly [7] 38:12 47:25 271:25 280:18 293:18 308:20 325:7 client [1] 79:16 clinic [1] 61:24 clinical [6] 189:15 190:13,13 229:4 257:20 257:21 clinician [1] 189:14 clinicians [2] 258:24 259:2 clock [1] 239:23 close [2] 115:18 270:5 closely [3] 197:2,11 198:4 Co-counsel [2] 1:6,7 coalesced [2] 118:23 129:12 coaster [1] 301:6 Coffey [487] 1:6 2:3 3:2 3:4,5,9,21 4:8,19 5:2,11 5:23 7:8,13 9:10,22 10:1 10:5,15 11:7,13,19,24 12:4,14 13:10,15,22 14:9 14:13,20,24 15:4,12,17 16:2,6,12,17,21,25 17:4 17:10,14,21 22:12,16 23:3,9,16,20 24:3,8,24 25:9,16,20,25 26:5,13 26:17,24,25 28:4,8,14 28:23 29:8,14 30:6,11 30:15,22 31:2,8,13,21 31:25 32:4,12 33:3,7 34:8,12,17 36:16,23 37:21 38:2,7,17,24 39:3 39:9,13,18 40:7,18 41:3 41:9,21 42:1,6,14 43:4 43:15,23 44:3,12,23 45:14,23 46:3,8,13 47:5 47:10 48:6,14,24 49:6 49:10,14 50:9,14 51:1,9</p>
<p>-C-</p>				
<p>c [2] 108:19 188:19 cabinet [7] 116:20 117:8 118:21,24 119:6 142:3 251:21 calculate [2] 36:15 97:19 calculated [1] 36:12 calculating [1] 26:8 calls [11] 89:19 90:24 108:25 124:19 125:21 141:17 143:12 175:12 201:14 265:17 279:8 Cameron [2] 1:3 335:6 Canada [1] 296:15 Canadian [3] 1:14 108:22 241:14 cancer [39] 1:12,14 6:6 49:19 50:4 82:17 108:22 115:17,19 141:18 142:20 142:23 143:1,8 151:6 185:8 222:11 236:23 237:9 241:14 267:16,16 274:15 276:21 277:4 278:19 279:11,24 286:8 288:8,13 289:5,5 290:23 291:11,14 292:9 304:13 304:18 candid [1] 186:19 candor [1] 239:4 cannot [5] 240:18 288:7</p>				

<p>51:14,18 52:4,8,13,17 53:1,7,19 54:1,7,17 55:7 55:14,20 56:1,4,11,15 56:19,23 57:7,17,22 58:5 58:9,15,20,25 59:19 60:9 60:13,19,25 61:8 62:21 63:2,12,17 64:4 65:5,14 65:21 66:6,22 67:4,13 67:21,25 68:5,12,18,22 69:8,13,18 70:1,7,11,18 70:24 71:3,10,16 72:6 72:23 73:2,11,22 74:1 74:20,24 75:4,8,21 76:22 77:9,16,23 78:17 79:2 79:25 80:4,10,14,23 81:3 81:7,11 82:8 83:6,11,17 84:8,15,21 85:3,8,13 86:9,13,19 87:1,7,17 88:4,13 89:2,6,10,14 90:3,7,18,23 91:4,9,13 91:17,21,25 92:13,19,25 93:4,8,13,17 94:3,8,12 94:23 95:2,10,24 96:4 96:11,15,20 97:1,10,23 98:3,11,19 99:1,7,15,22 100:10,15 101:5,16,23 102:5,14,21 103:20,24 104:4,10 105:18 106:1,7 106:12,19,24 109:13,21 110:22 112:17 113:10 114:2,15,19 115:3,21 116:2,3,10,21,25 117:5 117:11,15,20,25 118:4 118:12 119:7,19,24 120:3 120:12,20,25 121:6,12 122:3,8,15,19,23 123:16 124:3,12,23 125:17 126:8 127:14 128:20 129:20 130:9 131:9,14,21 132:3 132:7,15 133:4,8,11,24 134:6,12,17,22 135:3,8 136:5,16 137:1,6,16,22 138:4,12,18 139:1,7,13 139:18 140:11,15 141:13 142:8,13 143:3,15,19 144:18,23 145:2,6,18,22 146:12,19 147:1,12,19 147:23 148:12,20 149:5 149:14,19,23 150:4,9,14 150:25 151:7,24 152:4 152:14,23 153:12,19 154:4,11,16 155:2,6,10 155:14,18,23 156:6,15 156:25 157:5,12,20,25 158:4,17,22 159:1,11,20 160:18,23 161:5,12 162:3 162:9,15,19 163:3,9,18 163:24 164:5,12,17,21 164:25 165:6 166:21 167:1,7,12 168:16,20 169:9,15,19,23 170:2,7 170:11,20 171:3,8,15,21 172:2,7,18 173:1,5,10 173:14,19,23 174:11,21 175:13,18,23 176:17,22 177:4,9 197:10 204:24 206:18 214:17 236:21 Coffey's [1] 177:25 cognizant [1] 260:24 collaborative [1] 39:22 collaboratively [1] 40:1 colleague [1] 9:2</p>	<p>colleagues [2] 103:2 222:8 collectively [1] 32:21 colourful [1] 9:3 column [1] 318:3 combination [1] 210:19 comfort [2] 300:11 301:1 comfortable [4] 53:18 141:2 300:19 315:12 coming [9] 3:25 17:19 84:5 87:13 123:10 149:2 184:12 220:18 332:11 commenced [1] 233:2 comment [15] 12:2 15:2 80:11 96:17 104:5 121:7 215:14 266:4 267:1 294:18 296:8 300:7 315:13 316:18 318:16 comment' [1] 104:22 commentary [5] 40:10 57:12,18,24 293:16 commenting [2] 75:20 96:22 comments [8] 6:4 103:3 104:13 122:13 202:25 203:7 238:18 307:3 Commission [13] 1:1,6 1:7 58:17 110:1 137:15 183:14 230:9 244:20 246:1,2 335:4,7 commissioner [63] 1:3 3:1,6 37:2 50:20 51:5 59:7,12 86:15 90:11 106:21,25 114:3 115:22 115:23 116:1,4,5 117:6 119:9 166:13 176:1,3,15 176:19,24 177:7,11,15 177:20 178:1,4 203:1,3 203:6,16,23 204:2,6,7 204:11,17 219:15 239:7 239:10,15,20,21 240:4,8 272:14 283:9,18 297:22 298:2,13 299:13,17,22 300:2 333:24 334:11 335:7 committed [1] 186:18 committee [1] 156:20 communicate [8] 69:12 83:12,23,24 226:19 243:4 243:7 258:12 communicated [5] 18:7 69:4 75:23 82:15 280:15 communicating [6] 98:20 125:24 221:8,19 238:6 292:8 communication [30] 66:24 148:5 183:18,21 183:25 184:1 194:17,17 194:21 195:25,25 196:1 196:2 207:11 222:24 229:19 236:25 249:3 262:5,7,14 266:2 267:7 267:10 271:2 282:25 283:1,1,12 287:3 communication's [1] 219:10 communications [89]</p>	<p>3:16 8:16 17:6 72:2,18 76:14 87:23 111:5 126:11 126:15,19 127:9 137:12 144:14 152:8 160:1,2 167:15 169:2,5 184:2,6 184:9 195:16 200:11 205:20 206:10,15 218:25 219:6 220:6,8 222:21 229:22 230:2 241:21 242:6,18,24 243:15,19 244:2,7 246:1,9,12,20 246:25 247:4,11,14,22 248:20 248:6,15,16,18 248:20,21 249:11 252:10 252:14,15,16 253:8,14 253:22 254:14 259:9 262:1,12 266:3,5 271:9 272:2,3 278:12 280:18 282:13 286:3 287:4,7 294:17 296:10,13 306:14 307:12 331:9 333:2 communiqué [1] 98:16 community [6] 112:8 132:9 225:10 261:1 262:21 269:5 companies [1] 127:7 company [6] 126:15 214:20,23 224:10 225:5 236:2 comparing [1] 42:11 compelling [1] 304:20 competence [2] 209:17 228:6 complete [2] 130:19 212:2 completed [1] 85:24 completeness [1] 315:13 complex [5] 74:18 288:22,25 289:17,21 compliance [1] 185:4 complicated [3] 19:5 185:12,18 complicating [2] 27:5 74:17 complimentary [1] 202:22 component [3] 168:8 243:10,11 components [1] 301:13 composed [2] 206:1 221:12 comprehensive [1] 121:21 conceivably [3] 186:2,3 274:17 concept [6] 221:4 262:13 283:15 285:15,21,24 concepts [1] 18:3 concern [19] 4:9,24 6:1 9:6 84:3 136:6 150:2 151:8 157:16,16 179:20 185:4 193:25 229:3 236:2 238:2 253:4 305:24 319:15 concerned [9] 8:21 61:16 62:1 83:1 100:22 130:20 167:2 279:11</p>	<p>287:25 concerns [19] 35:18 43:7 54:20,23,24 61:4 62:14 179:18 229:4 300:24 301:20 307:23 310:8 312:8 315:4,16 316:17 318:25 324:24 concludes [4] 104:25 152:7 159:22,22 conclusion [2] 328:23 334:19 conclusively [1] 65:17 concur [1] 104:7 concurred [1] 15:7 conduct [2] 34:25 153:2 confederation [1] 117:16 conference [25] 65:24 69:19 73:13 113:17 116:18 117:21 118:11 119:3 128:5,10,19 136:19 138:5 147:17 148:18 152:25 153:2,10,18 171:11 215:12 226:2,4 266:24 300:17 confidence [7] 168:1 211:12,22 226:25 228:2 300:4,6 confident [1] 21:8 confidential [2] 107:4 203:18 confirmed [4] 8:1 61:25 125:3,7 confront [1] 73:6 confronted [1] 103:1 confuse [1] 322:4 confused [5] 19:12 30:20 89:24 105:16 238:12 confusing [6] 20:2 27:12 28:1,22 125:25 126:5 confusion [9] 92:3 94:14 94:16 108:25 136:22 141:19 159:25 175:4 328:21 congratulate [1] 202:23 consciously [3] 29:24 112:19 182:23 consensus [8] 17:7 256:10 264:5,6 272:16 272:19,21 273:1 consequences [1] 108:11 consider [11] 22:4 27:25 210:6 214:1 230:3 283:5 283:8 284:18 286:7 287:15 319:4 consideration [8] 153:7 153:8 214:14,15 227:12 229:7 253:18 306:20 considered [11] 203:18 204:25 221:22 222:23 243:5 285:1,7,9,10,25 287:2 considering [1] 208:12 consistent [1] 135:12 constantly [4] 270:13</p>	<p>303:15,16 304:12 constraints [1] 252:25 consult [14] 191:16,19 192:22,25 193:22,23 194:2,14,22 217:4,8 218:11 268:3 287:11 consultation [1] 219:5 consulted [1] 198:20 contact [20] 79:15 82:4 87:2 102:19 125:15 127:17,20 128:14 179:19 179:22 183:24 184:24 196:12 201:14 225:15 268:17 279:13 283:21 284:3 308:21 contacted [12] 79:5,12 80:19 82:6,25 97:11 116:6,12 125:4,11 277:3 279:5 contained [1] 273:23 contemplated [1] 277:12 contemplating [1] 204:21 content [10] 160:4 242:15 257:12,15,19 276:20 277:11 280:23 286:21 327:14 contention [1] 313:6 contents [3] 2:1 160:24 160:25 context [6] 104:1,24 109:20 185:2 210:3 244:10 continue [4] 102:23 240:6 303:20 334:7 continued [1] 89:11 continues [4] 107:8 167:21,22,24 continuing [4] 66:1,1 286:1,12 contract [1] 137:13 contradict [1] 136:7 contrary [1] 215:24 contribute [2] 20:1 286:20 contributed [3] 54:16 55:5,10 contributing [2] 280:6 281:12 contribution [1] 269:15 control [2] 124:2 302:19 controls [2] 75:13,15 convenient [1] 106:22 conversation [10] 25:4 78:3 87:5 144:12 166:20 166:24 208:5 250:18 312:23 319:24 conversations [5] 20:3 20:11 45:1 85:21 123:4 conversion [6] 26:2 29:13 45:21 46:4 49:3 85:21 conversions [8] 23:17 25:17 49:4,7 67:8 70:19</p>
---	--	---	---	--

86:10 269:9 convert [4] 325:7 328:7 328:24 330:4 converted [1] 27:22 converts [1] 269:6 convinced [1] 209:8 Cook [3] 156:18 158:16 276:5 coordinated [1] 264:22 copied [7] 101:10 143:6 144:16 192:1 230:11,14 231:12 copies [2] 45:5 59:24 copy [5] 58:13,14 98:12 150:20 315:2 corner [3] 110:13 271:18 271:22 corners [1] 271:13 corporate [1] 152:8 corporation [8] 182:9 186:18 190:17 247:12 257:7,9,11 261:16 correct [32] 11:18 24:7 39:2 53:12 60:8 96:25 112:23 143:9 197:16 217:1 218:4 219:8 233:8 248:9 256:18 258:4 278:3 289:24 296:4 303:22 304:6,19,24 311:9 314:10 319:12 326:10 329:5,8 330:7,13 335:3 corrected [10] 60:2 100:6 113:22,23 141:7 149:1 172:16 256:22,24 308:22 correcting [1] 331:25 correction [1] 172:8 corrections [1] 148:2 correctly [1] 233:22 cost [1] 211:21 counsel [8] 102:8 176:21 177:2 223:23 224:9 240:17,22 241:4 counselling [1] 141:17 count [3] 210:16 213:17 235:25 counteract [1] 174:4 counterpart [1] 124:7 counterparts [1] 124:9 countless [1] 180:7 country [3] 158:13 165:19 215:4 couple [9] 20:15 123:15 126:23 141:6 174:12 236:19 259:6 263:23 300:1 course [6] 5:20 77:3 208:11 214:22 259:3 319:11 Court [6] 29:25 90:16 93:24 102:10 105:8 138:13 courts [7] 35:13 72:5,14 88:19,19,25 94:1 cover [2] 18:3 64:6	coverage [30] 18:5 63:14 63:25 64:1,3 65:23 66:1 70:3 100:19,21 101:8,18 111:7,10 123:25 126:4 140:20 141:5,6 142:3 144:1 148:1,2 167:22 172:20 173:2 302:25 306:24 316:10,13 coverages [1] 172:22 covered [4] 20:25 64:12 77:21 287:21 CP [1] 324:3 crack [2] 264:10 280:23 crash [1] 126:22 Crawley [1] 141:23 create [1] 173:25 created [1] 231:1 creating [1] 109:2 credibility [5] 107:5 110:15 111:19 112:11,16 credible [7] 107:11 111:21,23 112:3,7,11,14 creep [1] 328:9 crisis [24] 126:15,19 167:15 168:6,9 170:3 205:20 206:10,15 218:22 218:25 219:6 222:23 226:20 247:1,4,7,9,11 247:13,22 248:4 253:14 253:15 critical [1] 268:3 criticize [3] 108:13,17 114:5 criticizing [1] 114:11 Crosbie [170] 1:12 2:4 107:13 112:9 177:17,22 177:23,24 178:6,17,23 179:5,9,25 180:5,13 181:3,8,13,18 182:13,21 183:4 184:11,19 185:1 186:1,7,16 187:3,8,17 188:1,6,14,24 189:6,17 189:22 190:3,15,23,24 191:3,12,22 192:6,12,16 192:20 193:9,14,18 194:8 194:13,23 195:3,7,12,19 196:21,25 197:5,9,19,23 198:3,8,12,16 199:4,11 199:24 200:6,15,20 201:2 201:7,17,21 202:6,12,17 203:10 204:9,14,18,19 205:3,8,25 206:6,12 207:8,14,19,23 208:15 208:19,24 209:4 211:18 212:8,25 213:15,22 214:6 214:18,25 215:9,18 216:4 216:11,18 217:2,9,25 218:5,14,20 219:1,9,14 220:4,11,15 221:2,11,16 221:23 223:3,8,13,21 224:4,8,15,19 225:4,8 226:15 227:18,24 229:8 229:13,18,23 230:6,21 231:11,17,22 232:5,9,10 232:18,24 233:5,15,25 234:9,15,22 235:6,15,19 236:9 239:1,8 240:12 Crosstalk [1] 173:6	Crow [1] 5:17 crystal [1] 321:2 CTV [1] 324:3 CTV.ca [2] 324:14 327:1 cup [1] 36:5 current [4] 89:22 95:11 116:7 243:2 cursor [1] 191:17 cursorly [1] 137:4 cut [2] 166:11 275:19 cycles [1] 167:23 <hr/> -D- <hr/> daily [5] 196:19 288:17 291:11 305:6,9 Dan [7] 35:19 43:25,25 44:18 45:2 104:23 105:1 Daniel [1] 1:10 dashes [1] 203:25 database [1] 253:21 date [11] 4:17 8:1 141:22 146:3 169:22 181:14,19 226:3 230:13 232:25 255:24 dated [9] 132:4 138:13 151:1 154:23 202:21 300:23 325:23,24 335:11 dates [1] 234:2 David [1] 1:15 Dawe [23] 5:18,18 6:4,7 6:16,21 7:14 8:2,19,22 9:17 10:20,21,25 12:25 14:18 16:11 17:16 54:3 107:12 109:2 112:8 113:12 Dawe's [2] 12:18 110:18 days [14] 18:25 20:15 66:23 100:8 119:10 123:15 139:24 217:15 226:2 238:23 244:14 300:1 305:19,20 dazed [1] 20:7 DCIS [2] 19:23 27:21 de [1] 86:5 de-identifiable [1] 90:12 dead [4] 49:16 114:12 121:17 122:5 deadline [1] 78:22 deal [12] 88:6 110:8 147:15,16 205:19 206:9 246:19 249:2 269:8 270:17 271:14,18 dealing [16] 76:18 108:8 184:3 187:19 196:4 206:17 222:5,7 244:7 247:9,19 248:3 267:6 270:1,4,6 deals [2] 289:5 302:22 dealt [7] 35:12 57:2,3 65:17 117:1 126:20 159:18 Deana [3] 62:22,25 63:1 death [3] 8:11 9:12 14:2	debate [1] 102:9 Deborah [3] 230:15 276:6 307:18 decade [1] 142:24 deceased [13] 4:12,24 28:17 29:6 50:5,13 120:17,21 122:20,25 191:23,24 194:1 deceived [2] 237:19 238:19 deceiving [1] 237:3 December [49] 3:14 5:20 6:17,18,21 8:5 11:15,16 11:21 13:11 17:16,23 26:7 29:1 33:9 36:1 38:25 39:5 40:20,22 41:5 41:13 42:5 44:15 51:11 56:5 60:4 64:17 66:8 73:13 76:24 80:17 93:9 97:21 99:8 115:14 119:16 120:10 121:9,18,19,22 138:25 233:6 234:2,5 235:2 293:23 313:7 decided [4] 23:22 213:11 278:25 333:9 deciding [1] 265:11 decision [67] 13:3 14:7 15:5 16:1 21:14 22:3,23 28:7 32:13,18,19,20,21 52:18 113:15 116:17 118:6,10 127:10 190:16 190:20 201:13,23 202:7 202:8 210:20 213:10 228:9,16,19,22 231:23 232:7,12,14 238:9 255:5 255:10,18,23,25 256:6 265:16 272:2 279:7 280:16 294:19,22,23 295:1,2,10,12,13,16,25 296:23,24,25 297:1,9 298:22,23 299:6,7,18 332:4 decision-making [1] 297:13 decisions [17] 217:19 232:21,23 242:2 246:11 254:22 255:1 265:22 271:4,24,25 272:1,7,20 272:24 273:3,4 deck [5] 57:11 59:23 60:24 146:14,23 deemed [1] 225:14 defeating [1] 97:9 defence [1] 103:12 defend [2] 108:1 113:7 defer [1] 231:23 deficit [1] 290:18 defined [1] 187:10 definitely [3] 126:17 144:16 314:22 definition [4] 46:24 47:12,23,24 degree [1] 210:14 delay [1] 81:19 deleted [1] 209:7 deliberately [2] 103:8 104:6	delivered [2] 136:15 280:12 delivering [1] 303:1 delivery [1] 332:3 demanded [1] 111:11 demarkation [3] 262:13 271:1 272:10 Denic [11] 7:2 15:13,15 33:10 44:18 51:23 74:13 74:14 75:11 156:18 254:6 Denic's [1] 15:20 denied [1] 27:8 Denise [2] 273:8 276:4 denominator [5] 37:5,6 37:7 319:12 322:25 denominators [1] 25:5 department [62] 4:10 5:15 10:12 56:16 66:25 67:5 68:9 82:7,23 83:13 83:19 85:15 87:9 96:21 121:2 123:11,20 124:4 124:10 126:24 132:9 134:1,2 135:11 143:10 144:19 148:15 152:9 174:17 175:8 183:23 184:6,9 193:7 196:3,5 198:21,24 231:5,8 248:19 248:19 252:15 253:19,23 254:15 259:25 260:4,21 263:23 264:9,17 278:12 281:19 287:4 296:11 299:12 302:1 306:5,14 307:12 314:20 department's [1] 17:5 depend [1] 220:24 depending [1] 243:9 depersonalized [1] 86:5 deposed [1] 142:24 Deputy [1] 235:24 described [3] 227:20 229:14,24 describing [1] 324:25 description [5] 261:17 261:25 262:8 319:1 331:13 deserve [1] 111:10 despite [2] 65:3 165:20 destroy [1] 237:8 detail [2] 280:25 291:19 detailed [1] 142:9 details [2] 86:2 105:7 determination [1] 88:14 determine [3] 288:9,15 290:24 determined [2] 88:8 119:4 determining [1] 292:15 develop [2] 130:23 243:15 developed [6] 226:18 242:23 244:2,4 247:15 248:11 developing [5] 130:17 160:16,19 248:17,21
--	--	---	--	--

<p>develops [1] 107:22 diagnosed [1] 291:14 diagnosis [5] 288:8,14 290:23 291:12 292:9 diagnostic [1] 126:1 died [2] 49:18 50:3 differ [1] 132:20 differed [1] 133:5 difference [4] 36:9 237:22 246:24 269:23 differtly [26] 40:3 41:14 59:20 84:3 124:24 162:16 197:18 200:9 210:10,21 210:22 216:7 247:24 255:17 263:2 265:10 272:25 291:5 313:4 318:21 321:1,22 322:2,6 326:19 328:25 differently [1] 251:5 difficult [7] 104:25 174:4 254:5 270:18,19 288:25 289:1 difficulty [4] 158:11 300:2 301:10 303:18 diffuse [1] 141:18 digging [4] 107:20,21 166:3,17 diligent [1] 187:22 direct [9] 76:10 95:6,7 102:19 183:23 196:12 229:9 312:16 331:12 directed [1] 91:3 direction [2] 3:25 264:18 directive [2] 33:2,4 directly [8] 196:4 197:24 225:10,19 269:4 282:18 283:22 284:6 director [9] 17:6 137:11 152:8 160:1 193:2,6,11 195:14 296:13 directories [1] 253:23 directory [1] 254:9 disadvantage [1] 62:3 disagree [5] 183:8 206:12 212:23 227:3 263:13 disagreed [3] 207:25 218:2 227:19 disappointed [2] 63:22 64:5 disclose [4] 103:6 162:7 188:18 283:22 disclosed [2] 235:4 283:19 disclosing [3] 226:23 234:24 285:16 disclosure [79] 180:21 183:18,20 184:4,15,21 185:5,10,17,20,25 186:19 188:16,19 189:9 190:7 194:3,15,17,21 207:22 211:20,23 212:11 213:24 214:9 215:11,21 216:24 223:17,25 226:7,21 228:10,13 236:3 238:12</p>	<p>262:14,17,19,20 263:17 265:5 266:1,1,23 267:9 269:16,24,25 271:3,7,8 280:8 282:14,15,17,17 282:25 283:3,6,10,12,15 283:17,20 284:5,7,18,20 285:2,7,11,16,25 286:15 287:16 298:11 300:23 disclosures [6] 103:11 190:12 196:18 197:22 281:13 283:24 discomfort [1] 328:19 discontinue [1] 144:2 discovered [5] 21:25 255:11 276:23 278:21 308:8 discovering [1] 290:16 discovery [1] 187:23 discuss [5] 44:24 71:17 145:13 166:10 170:23 discussed [16] 16:8,10 28:25 33:1 35:15 39:15 39:17 47:13 139:22 174:16 249:18 265:9,16 265:17,18 291:16 discussing [3] 273:2 294:18 300:8 discussion [14] 2:5 5:5 5:10 69:21 71:6 112:5 139:19 188:25 196:8 201:12 217:13 234:5 236:8 272:25 disease [1] 237:7 dismissed [1] 36:21 dissenters [1] 52:20 distillation [1] 206:8 distinct [1] 282:12 distinction [6] 263:1,5 263:9 265:25 282:12 283:14 distinguishes [1] 283:11 distressing [1] 6:5 distribute [2] 42:9 166:7 distributed [7] 10:11 139:9 146:2 162:23 165:10 176:7 240:16 distribution [1] 203:8 divide [1] 21:14 divided [4] 26:1 28:10 129:14 210:9 division [4] 1:14 21:18 195:23 241:15 divisions [2] 210:10,23 docket [1] 90:2 doctor [4] 81:16 115:4 213:12 279:14 doctors [6] 1:9 76:4 163:14 164:4 199:18 200:7 document [36] 30:1 93:19 146:2 156:19 167:19 178:10 180:16 188:25 191:14 205:18,19 205:21 208:16,21 226:16 226:17 227:4,15 230:11 232:11,25 240:15 241:2</p>	<p>241:5 242:11 245:7,9 247:5,8 249:20 254:7 266:13,16 268:9 275:16 317:14 documentation [3] 189:8 190:5,6 documents [4] 68:25 205:15 252:24 270:24 Dodge [3] 107:2 166:8 170:17 doesn't [10] 62:7 105:6 114:12 193:20 194:18 214:11 232:1,4 280:15 293:16 dominate [2] 167:23 302:24 done [58] 6:11,11 7:18 7:18 9:23 11:1,25 12:2 13:20 18:15 21:5 24:10 37:11 40:4 54:21 76:12 85:5 125:6 127:5 146:6 151:22 156:5,7 157:8 169:7 172:23 205:5 206:19,20 210:11,24 213:5 217:8 219:4 226:11 226:12 231:9 238:11,24 244:21 259:6 283:10,24 294:17 308:22 310:4,16 311:8,13,20 312:5 314:19 316:20 319:6 326:18 329:5,13 331:5 door [1] 302:20 Dornan [2] 128:17 129:9 double [2] 144:17 204:13 doubt [1] 187:13 doubts [1] 237:5 down [28] 73:9 76:9 81:21 93:24 100:8,8,16 109:6 142:17 151:2 186:17 188:15 189:2 190:19 213:1,16,17 215:10 235:25 237:1,6 237:12 278:17 303:15 309:21,22 325:12 326:13 dozen [1] 197:6 Dr [98] 7:2,2 15:10,10,13 15:15,19,21,21 21:23,25 33:22 37:11,23 39:5 40:12,13,14,15 51:21,22 51:23 53:6,8,8,14 61:22 74:13,14,25 75:11 78:7 94:19,24 116:12 124:17 147:7 148:24 153:1,11 153:25 154:24 156:13 157:15,21 158:6,10,16 158:16 161:9 170:17 175:7 178:13 180:24 194:24 234:10 249:19 254:6 264:18 273:7 274:8 275:18 276:4,5 288:10 300:25 306:4,25 307:23 308:14,17,25 309:1,4,9 309:24 312:1,15,24 313:11,17 316:18 317:16 318:15 319:12,21 320:18 322:17 327:23 328:14 329:17 330:5 331:14 332:5,25 333:4,5,17 draft [18] 33:14 41:16</p>	<p>58:24 147:3 149:18 161:15 182:4 199:1,13 205:1 227:9 250:9 273:14 273:18 275:10 278:5,7,7 drafted [13] 160:19,21 160:22 161:18 197:4 199:2 216:20 217:3,7 218:8 219:3 277:7 278:9 drafting [7] 101:20 149:10 197:11,14 198:4 275:11,20 drafts [1] 45:3 dramatically [2] 43:1,2 draw [3] 282:11,12 283:14 drawing [1] 109:25 drawn [1] 257:21 dreading [1] 110:2 dropping [2] 237:6,12 drug [1] 310:2 due [3] 5:8 227:3 301:11 Dunn [2] 273:8 276:4 during [11] 3:14 17:16 26:6 28:25 103:3 136:22 222:21 249:15 279:25 294:15 299:25</p>	<p>73:16 79:9,15 82:18,19 82:19 83:20 85:18 91:5 96:21 101:11,12 102:11 103:5 111:25 112:4,4 114:22 122:13,13 126:9 126:18 135:11 136:24 138:7,19 144:8 148:14 148:17,21 154:20 165:11 167:14 168:17 179:10 180:8 182:10,12 183:16 186:22,25 187:1 205:18 206:8 211:19,24 212:6 222:9 224:11 226:17,22 228:3 231:10 234:18 238:5 243:17 257:6 263:4 276:20 278:18,24 279:19 284:23 287:12 293:20 296:11 299:12 302:2 304:2 305:5 306:18,25 309:25 easy [2] 239:2 289:12 Eaton/Stacy [1] 1:15 editing [1] 207:5 editor [3] 149:11 150:12 150:15 editorial [1] 171:9 education [2] 292:2 297:19 educators [4] 260:10,13 260:16 261:7 effect [6] 83:16 130:1 181:21 182:16 221:25 235:7 effective [1] 72:16 effectively [7] 18:7 35:9 128:1 168:8 293:13 303:1 313:2 effort [3] 127:4 191:15 330:15 efforts [1] 168:10 eight [2] 189:8 220:21 either [20] 27:11 29:6 44:10 45:25 48:1 49:18 76:14 98:15 208:1 225:12 225:18 236:21 237:25 262:10 287:11 300:24 307:18 312:20 319:17 322:1 Ejeckam [8] 154:24 156:3,14 157:15,22 158:7 158:10,16 elaborate [2] 261:6 294:23 electronic [1] 203:24 electronically [1] 254:10 elements [1] 242:20 eleventh [1] 21:25 Elizabeth [1] 165:3 Elliott [1] 124:18 elsewhere [2] 99:20 147:11 embargo [1] 62:11 embarrassing [1] 9:4 embedded [1] 102:23 emergencies [1] 247:15</p>
---	---	--	---	--

-E-

e [3] 113:4 130:14 199:16
e-mail [62] 5:13 6:15,23
9:1 10:2 13:23 16:13,16
33:9,16 35:25 40:19
43:22 44:14 52:14 56:5
66:7 78:6 79:20 80:22
83:16 85:14 98:15 101:9
103:15 104:16 107:1
109:19,24 110:7,21
112:23 113:18 116:22
119:11 121:14,17,20,22
123:3 124:14 127:23
130:1 131:23 141:14,20
143:4,21,23 154:17
161:14 165:1 166:7
174:22 176:4 178:11
179:6 218:16 273:7 276:3
276:15 277:16
e-mails [15] 7:20 101:15
102:22 112:25,25 123:21
130:11 131:4 145:8,24
149:7 165:1 174:23 200:8
315:20
early [17] 18:25 85:25
89:7 92:22 173:7 179:12
183:10 201:4 222:4,4
223:5 233:11 244:14
245:14 311:17 318:18
332:10
earned [2] 111:12,12
ears [1] 130:5
earth [1] 236:4
eased [2] 253:4 254:11
easily [4] 205:12 248:1
325:4 328:4
Eastern [84] 1:10 6:25
14:3 22:24,25 23:22,22
53:2 63:18 66:25 69:21

<p>emergency [1] 126:22 emphasizing [1] 78:11 employee [1] 82:7 employees [1] 63:20 employer [1] 184:14 employment [1] 184:12 encourage [1] 79:13 encouraging [1] 189:25 end [12] 22:8 39:23 61:15 61:20 79:17 80:16 98:22 154:12 236:17 243:12 273:3 302:11 ended [7] 62:9 70:2 86:14 148:9 153:4 227:1 324:11 endorsement [1] 212:10 ends [3] 76:24 102:6 168:3 energies [2] 76:16,16 engage [2] 169:4,6 engaged [1] 123:19 engaging [2] 168:12 211:22 ensure [5] 74:10 82:24 225:17 276:25 278:22 entered [1] 180:19 entering [1] 100:7 entire [1] 44:24 entirely [1] 93:21 entities [2] 182:17 183:16 entitled [2] 167:14 218:16 environment [4] 256:10 259:10 264:5 304:25 equal [1] 153:24 equals [1] 48:8 equation [1] 297:8 equipment [8] 310:4,14 311:17 312:6,9 316:20 316:23 317:7 ER [7] 276:22 278:25 279:2 320:15,15 322:2,9 ER/PR [54] 8:16 19:16 37:13 38:13 64:11 66:14 81:13 85:22 87:19 88:24 101:17 107:3 124:20 134:8 138:14 165:13 167:21,25 185:2,11 187:13 197:18,24 206:17 210:14 227:14 230:13 233:18 242:2 244:11,13 246:10,19 248:1,12 249:3 251:17 255:7 262:12 269:7 274:1,16 277:14 279:25 284:25 288:3,22 288:23 290:2 292:13,21 293:4,9 294:2 error [28] 18:23 19:5,7 20:1,8,10 23:12 24:16 24:18 33:12,17 36:2,11 36:19 45:11,20,21 46:5 46:16 59:2 68:15 97:20 120:18 139:25 233:20 276:9 313:8 317:6 errors [4] 46:18 100:5</p>	<p>141:6 308:23 especially [1] 45:7 essence [1] 9:5 essential [2] 24:14 204:15 essentially [1] 53:12 establish [1] 136:23 estimate [1] 334:8 estimating [1] 313:13 estimation [1] 38:15 estrogen [1] 146:14 et [1] 1:9 etcetera [5] 35:18 165:25 231:24 333:12,13 ethical [1] 108:6 ethics [16] 180:20 191:16 191:18 192:25 193:11,13 193:19,22,23 194:2,14 194:22 195:15 217:4,8 218:10 evaluation [1] 243:11 evening [3] 44:16 61:23 176:5 event [26] 35:2 181:5 184:4,8,17,25 185:10,14 185:16 186:12 187:9,14 187:23 188:19 193:21 223:2 244:3,4 281:22 282:18 283:22 284:14 285:18 286:1,10,15 events [8] 96:6 180:21 184:5 186:20 202:14 245:3 247:24 300:8 eventually [5] 86:16 162:11 199:2 302:18,19 everybody [19] 62:8 63:7,11 80:18 100:24 115:14 125:11 135:21 161:3,6 180:11 232:19 255:13 263:4 271:12,15 271:16,18 289:5 evidence [14] 77:21 117:6 200:17 207:9 241:18 247:21 249:16,25 257:1 273:10 287:1 289:18 294:15 299:25 evolution [1] 301:11 evolved [5] 167:25 244:14,16,16,16 evolving [2] 289:22 301:15 exact [2] 24:21 175:2 exactly [3] 129:14 201:22 290:9 examination [6] 2:3,4 2:6 177:23 236:18 241:8 EXAMINATION-IN-CHIEF [1] 3:3 example [17] 74:25 141:8 173:25 243:20 244:8 246:2,4 252:14 253:25 263:22 267:21 285:18 291:25 302:16,19 304:11 306:17 examples [1] 280:5</p>	<p>excellence [1] 226:25 excessive [1] 232:13 exchange [6] 4:15 5:17 103:15 123:3 133:18 134:23 exchanging [1] 133:14 exclude [2] 28:2,18 excluded [1] 28:17 excluding [1] 61:17 executive [13] 100:20 101:11,12 154:19 165:10 170:15,22 173:18 235:12 253:13 275:15,16 315:3 executive's [1] 236:8 exhibit [56] 2:5 5:12 6:13 6:22 7:15 13:24 33:8 44:13 56:3 57:8,10 58:21 66:7 77:24,25 78:5 85:4 101:6 106:20 119:10 121:13 124:13 130:10 131:22 137:23 141:14 142:14 143:20 145:7,23 146:13 149:6 150:18,22 154:5 161:13 162:20 164:18 167:13 180:19 202:18 203:11,21 204:20 205:11 208:2 240:12 266:12,14 273:6 276:2 287:22 309:14,15 327:18 333:23 exhibits [1] 293:9 exist [1] 280:19 existed [4] 126:19 195:4 247:11 262:1 existence [2] 126:24 207:11 exists [4] 43:18 241:3 243:20 247:6 expect [4] 190:18 270:16 274:18 327:24 expectation [2] 263:11 263:14 expected [12] 69:14 86:2 88:1 102:7 187:21 288:7 288:12 290:22 321:1 325:7 328:6 330:4 experience [8] 200:7,9 257:2,3 258:8,18 292:1 297:19 expert [4] 129:4 196:13 268:4,8 expertise [12] 126:10 218:22 259:3,23 260:4 261:3,6 271:7,8,23 296:6 297:7 experts [5] 141:1 219:6 257:21 287:21 288:21 explain [11] 96:16 195:20 195:22 236:4 246:24 288:21 289:1 290:6 291:10 294:8 322:20 explained [7] 30:18 36:20 205:4 216:15 284:5 292:7 293:3 explaining [1] 284:13 explains [1] 293:13</p>	<p>explanation [14] 4:4 33:17 35:2 36:6,7 37:1 62:15 71:22 81:19 84:9 202:13 240:14 244:12 331:7 Explicitly [1] 68:13 exploration [1] 66:2 expressed [9] 4:20 13:23 61:3 202:3 207:3 238:22 301:4 306:3 328:19 expressing [3] 15:15 70:13 104:17 expression [2] 4:9 10:16 expressions [1] 15:2 extend [1] 78:21 extension [2] 138:24 178:2 extensive [1] 141:5 extent [4] 140:21 219:3 281:5 314:9 external [14] 73:18 74:3 74:6,7 76:14 77:18 154:8 287:12 310:3,13,25 312:4 314:2 316:19 extra [2] 128:13 130:4 extremely [1] 227:1 eyes [2] 128:13 130:5</p> <hr/> <p style="text-align: center;">-F-</p> <hr/> <p>facilitate [1] 307:10 facilitating [1] 193:7 facility [1] 326:15 fact [55] 4:2 5:6,6 7:9,22 10:8,22 12:15 13:16 21:8 24:9 25:10 27:5,7,10 37:10 45:24 47:16,18,20 69:9 70:14 82:16 83:12 89:15,25 90:12 92:11 125:5 139:9 140:3 153:16 155:19 158:1 175:6 179:13 199:15 210:4,7 212:1 226:2 227:12 234:7 241:18 244:18 253:21 255:15 260:25 270:20 281:20 283:25 289:19 298:20 313:9 329:22 factor [7] 24:19 27:5,12 54:14 213:24 214:9 294:10 factors [20] 18:22 20:24 21:2 22:22 35:12 54:15 55:4 62:17 67:7 68:19 74:8,17 106:3,6 118:16 118:17 152:22 210:20 234:4 265:10 facts [1] 107:25 failure [2] 75:10 76:25 fair [6] 53:14 63:7 64:2 111:10 308:11 321:11 faith [2] 108:9 210:1 fall [8] 127:2 147:16,20 147:24 207:16 222:15 306:23 311:3 falls [1] 210:14 false [2] 110:19 327:25</p>	<p>familiar [6] 53:9 309:16 317:19 325:13 327:9,12 families [5] 6:7 49:24 191:23 194:1 289:6 family [3] 82:20 115:18 279:14 fan [1] 104:21 far [13] 35:20 43:17 44:6 73:15 77:13 86:24 92:7 192:1 204:15 212:2,3 218:7 324:23 fast [2] 168:11 225:15 fault [2] 110:18 293:19 faulty [1] 317:7 favour [6] 30:7 189:24 200:22 201:18 215:23 256:6 fear [1] 109:1 February [5] 87:21 126:13 138:13 146:3,3 fee [1] 144:10 feedback [4] 35:22 43:6 43:13,19 feeling [4] 63:5 153:17 333:4,6 feelings [1] 212:15 feels [1] 107:19 fell [5] 127:1 196:5 207:20 262:20 313:4 fellow [1] 63:20 felt [25] 9:18 20:22 53:17 53:18 55:12 64:21 110:12 110:12,20 111:3,13,14 112:13 115:13,14 128:12 161:24 187:2 238:18,19 265:20 270:25 290:17 297:14 308:10 few [7] 24:11,11 147:8 235:21 301:25 308:2 334:2 field [1] 219:10 fifteen [1] 115:24 fighting [1] 72:4 figure [16] 20:5 28:1,24 30:19 36:11 37:14 38:8 38:18 298:24 317:5 320:22 322:7,18,21 331:10,11 figured [1] 91:1 figures [1] 317:16 file [2] 58:14 90:1 filed [8] 90:16 92:14,15 92:17,20,22 138:13 139:24 final [19] 41:5 45:24 51:19 52:18 56:8 58:23 59:10,13,22,25 60:10,23 108:21 114:4 122:4 162:13,25 206:2 266:15 finalized [2] 57:5 182:5 finally [6] 65:17 116:15 130:25 173:24 178:20,24 financial [1] 159:16 finding [2] 64:17 169:5 fine [6] 62:8 63:8,9,9</p>
---	--	--	--	---

<p>191:5 334:2 finish [1] 334:1 finished [1] 245:7 fire [2] 123:15 126:22 fires [1] 104:21 first [63] 7:14 13:13 20:12,14 32:10 34:2 54:2 54:8 57:13 63:19 76:1,5 77:25 89:15,20 90:19 91:14 94:16 95:15 99:23 104:17 114:7 123:23 127:21 134:13 139:3 145:9,25 164:6,11 165:2 165:16 168:3 170:12 177:19,22 178:8 186:8 207:4,24 209:1 217:19 228:12 235:10 241:16 250:15 261:15 263:24 264:10 273:14,18 275:10 275:15,19 280:22 281:21 282:9 284:12 295:4 317:18 318:4 325:23 332:3 fit [1] 8:7 five [3] 21:19 177:13 213:18 fix [2] 6:12 7:19 fixation [3] 54:24 75:12 76:7 flag [1] 78:10 flagged [1] 78:15 flags [1] 78:13 flaw [1] 294:16 flawed [1] 166:2 Fleet [1] 63:6 flood [1] 126:22 flowing [1] 159:7 flown [1] 164:15 flying [1] 123:4 focus [29] 20:23 29:18 76:15 99:19 135:16,22 136:10 140:1 172:8 211:11,12 219:11,16,18 219:24 220:2,8,22 221:12 221:17 222:18 246:19 312:8 316:9 331:1,3,4,4 331:6 focused [11] 20:19 29:21 31:7 76:17 84:18 135:17 147:10 168:5 281:20 282:6 322:14 focusing [4] 271:6 308:14 313:22 316:2 fodder [1] 104:20 Fog [1] 309:2 folder [1] 254:10 follow [10] 22:10,18 63:14 84:23 159:23 190:18 217:22 225:18 286:9,10 follow-up [2] 7:25 125:7 followed [8] 82:24 83:3 83:4,10 182:24 191:9,11 212:9 following [23] 6:8 35:19 43:11,24 45:1 62:5 66:14</p>	<p>78:19,24 79:22 98:10 142:3,10 144:20 182:6 206:14 217:21 276:19,20 307:22 316:15 327:5 330:19 follows [1] 102:2 Fool [3] 8:11 9:13 14:2 forcing [1] 215:3 forefront [1] 165:21 foregoing [1] 335:2 forgive [1] 180:6 forgiving [1] 237:17 forgotten [1] 27:17 form [5] 27:20 65:2 182:4 240:17 289:4 formal [8] 200:1 206:16 207:10 222:23 225:13 242:11 252:1 261:17 formality [1] 250:16 formalize [1] 251:3 formalized [1] 250:23 formed [1] 179:11 former [3] 126:20 182:7 183:16 formulated [1] 299:7 formulation [1] 195:15 forth [4] 123:4 132:14 205:13 234:11 forthcoming [1] 12:25 forthright [1] 238:14 forward [10] 21:9 33:21 104:12 141:9 202:1 217:23 232:20 233:17 289:2 323:12 forwarded [6] 103:15 199:16,17 273:7 276:4 315:21 forwarding [3] 35:24 121:17 141:16 forwardings [1] 199:19 found [3] 64:23 81:13 91:14 foundational [2] 226:17 227:4 four [5] 66:10 108:13 213:18 235:25 327:17 fourteen [1] 221:1 fourth [4] 107:21 213:16 287:23 318:3 framework [1] 247:23 frankly [1] 209:6 freedom [1] 87:12 frequent [1] 127:17 Friday [14] 3:10 6:17,21 6:23 24:8 118:1,3 128:4 130:12 136:15 142:1 146:2 147:17 150:19 friends [1] 115:19 front [7] 65:12 80:24 163:2,12 194:14 203:2 313:23 frustrated [4] 110:5,25 110:25 111:3</p>	<p>frustrating [2] 101:4 131:2 frustration [3] 111:15 111:17 113:19 full [14] 108:10 170:8 211:20,22 212:10,11 215:11,20 223:16 226:7 226:21 236:2 244:2 266:23 full-on [1] 243:18 full-time [1] 306:19 fulltime [1] 123:9 fully [2] 35:7 123:19 functionally [1] 206:8 future [3] 240:22 253:15 320:7</p> <hr/> <p style="text-align: center;">-G-</p> <hr/> <p>G [2] 188:25 189:3 gained [1] 222:11 game [3] 108:19 179:12 223:5 gang [1] 107:21 gather [8] 8:9 11:14 57:11 101:10 119:16 154:18 252:11 275:4 gathered [1] 219:19 gathering [1] 290:5 general [14] 22:15 35:5 105:6 108:23 230:22 247:5,8,23 258:7 267:10 307:25 308:2,5 309:7 generally [9] 78:16 133:13 246:11 261:23 293:2 305:4 309:6,12 318:1 George [13] 7:1 8:15 44:18 78:7,18 80:6 121:18 129:13,19 152:11 166:8 210:5 276:6 Geri [2] 107:12 112:8 Gilhooly [2] 165:15 327:9 given [25] 24:20,22 26:8 62:15 67:6 81:18 88:25 90:1 115:10 153:1,8 157:13 162:2 226:8 227:12 236:14,16 265:22 274:19 277:6 279:20 286:2 293:1 313:25 327:20 giving [8] 14:18 62:1 200:17 265:3 268:1 269:8 305:6 323:9 global [1] 332:23 Globe [6] 149:11 150:2 150:21 172:13 309:3 324:11 goal [2] 211:7 316:7 goals [1] 167:17 goes [11] 57:9 94:1 135:2 159:2 168:2 187:9,18 188:7 271:12,18,21 gone [9] 18:17 23:6 49:2 54:11 73:14 164:16</p>	<p>170:14 176:1 228:15 good [41] 3:8 61:3 76:1,3 78:19 97:7,8,8 107:16 108:9 111:22,22 140:18 189:18 194:10 195:13 200:8 209:9,19,22 211:14 211:15 216:13 219:2 221:24 222:6 223:4,9 231:13 232:11 238:6 241:10,12 261:12 270:21 293:23 303:13 308:6,9 308:18 318:1 governed [1] 182:8 governing [1] 190:18 government [12] 10:11 118:21 132:19,24 134:9 135:10,19,21,24 136:6,7 151:20 government's [1] 135:15 graphic [3] 259:11,16 259:18 grapple [1] 289:15 great [4] 64:25 72:13 206:25 222:20 greater [5] 55:2 209:9 209:18,22 290:18 Green [6] 236:11,15 237:14,25 238:5,16 grey [1] 210:13 grind [1] 107:19 groove [1] 178:1 group [51] 15:19 17:7 21:16,17,22 25:1 27:12 32:18,22 39:10,12,15 40:21 42:9,21 52:20 55:9 55:15 79:14 108:24 112:2 196:11,11 219:11,16,18 219:24 220:1,2,19,22,25 221:5,12,12,17 222:18 243:1,4 262:10 270:2 271:11,15,24 272:22,22 277:13 285:15,17 296:25 331:18 group's [1] 55:12 groups [7] 21:14 55:9,15 55:18 140:24 220:8 282:14 guess [53] 18:4,14 19:9 20:7 24:7 29:17 36:14 44:10 45:8 61:22 81:24 82:21 105:3 109:18 126:3 127:10,18 133:23 140:18 168:24 179:17,20 180:24 182:15 185:19 186:22 188:3 192:23 193:8 194:25 195:22,23 206:2 210:25 214:11,22 216:17 220:24 231:10 251:4 256:9 258:1,13 259:8 270:23 283:14 297:5 300:11 303:13 308:14 318:17 321:7 333:2 guidance [1] 287:13 guide [1] 273:1 guided [1] 182:16 guidelines [1] 180:21</p>	<p>guides [2] 247:8 248:15 guiding [2] 248:3,23 guys [2] 133:19 166:12</p> <hr/> <p style="text-align: center;">-H-</p> <hr/> <p>half [5] 95:16 197:6 238:23 306:11 334:10 hammering [1] 129:11 hand [4] 152:11 209:17 209:19 316:7 handle [8] 72:15 128:1 148:8 183:17 194:3 208:21 222:6 272:9 handled [8] 4:21,21 84:3 111:4,13 236:24 237:2 237:11 handling [2] 246:10 284:25 hands [2] 130:5 275:12 handwriting [1] 58:6 Hanlon [1] 233:2 Hanrahan [2] 276:5,9 happening [4] 100:20 124:11 130:22 279:3 happy [2] 80:6 317:23 hard [3] 144:3 272:11 289:13 harder [1] 30:4 haste [2] 205:5 252:25 hat [1] 266:3 he'd [5] 11:3 12:2 90:1 90:10 91:2 head [3] 20:4 36:6 77:13 heading [6] 109:4 114:7 167:16,17 279:2,3 heads [1] 145:11 health [116] 1:11,16 6:25 10:12 14:3 22:24,25 23:22,22 34:23 53:3 63:19 66:25 69:22 73:16 79:9,15 82:18,19,19 83:13,19,20 85:15,18 91:5 101:11,13 103:5 111:25 112:4,4 114:22 122:13,14 126:9,18 132:9 132:23 135:11 136:24 138:8,19 144:8 148:14 148:17 154:20 162:2 165:11,23 167:14 168:1 168:17 174:17 179:11 180:8 182:7,9,10,12 183:17 186:22,25 187:1 187:20 189:1,11,16 200:21 211:19,24 212:6 222:9 224:11 226:22 228:3 234:18 238:5 243:17 247:12,17 252:15 257:6,6,9,11 261:2,16 263:5 276:20 278:18,20 278:24 279:19 282:17 283:16,21 284:7,21,23 287:12 293:21 296:11,14 300:10 302:2,21 304:2 305:5 306:5,18 307:1 309:25 317:5 324:18 327:18</p>
---	--	---	--	--

<p>Health's [8] 96:21 102:11 148:21 205:18 206:9 226:18 231:10 299:12</p> <p>hear [6] 64:25 71:19 95:3 105:1 113:11 224:3</p> <p>heard [14] 79:14 103:2 118:24 125:3 165:17 182:14 218:15 238:18 265:10 278:18 282:21 285:15 293:16 335:5</p> <p>hearing [3] 158:6 281:21 282:9</p> <p>heart [1] 8:19</p> <p>Heather [21] 7:1 19:6 33:11 35:20,25 44:16 45:2 51:25 89:21 96:9 116:9 124:15 149:8 178:11 179:2 199:22 260:7 264:21 276:5,9,11</p> <p>Heather's [1] 33:17</p> <p>heavily [3] 73:9 137:7 168:5</p> <p>heavy [1] 147:9</p> <p>held [10] 53:23 76:4 108:15 118:18 128:24 156:3 166:24 170:23 171:9 255:8</p> <p>Hello [1] 44:25</p> <p>help [14] 81:24 92:6 121:16 127:23 130:3 172:21 218:16 247:16,18 253:15 257:22 279:22 306:15 307:10</p> <p>helped [2] 20:16 255:18</p> <p>helpful [2] 130:6 201:16</p> <p>helps [1] 269:22</p> <p>Hence [1] 107:12</p> <p>Hennebury [3] 1:9 239:17,22</p> <p>Hennessey [2] 131:7 141:24</p> <p>Herald [1] 172:14</p> <p>hereby [1] 335:2</p> <p>Hi [2] 36:3 191:18</p> <p>hide [2] 107:25 212:18</p> <p>high [1] 78:9</p> <p>highlight [1] 236:18</p> <p>highlighted [1] 281:9</p> <p>highlights [1] 125:5</p> <p>Hill [1] 218:16</p> <p>himself [2] 6:19 320:19</p> <p>hired [2] 257:5 261:16</p> <p>HIROC [3] 224:18 236:1 236:1</p> <p>HIROC's [1] 236:2</p> <p>hold [3] 14:3 104:22 116:18</p> <p>home [3] 95:17,18,19</p> <p>honest [2] 133:8 237:22</p> <p>Honourable [2] 1:3 335:6</p> <p>hope [6] 35:22 81:24 113:18,23 178:2 283:23</p>	<p>hoped [5] 61:19 64:8,20 284:2 334:12</p> <p>hoping [2] 9:16 52:24</p> <p>hormonal [1] 288:6</p> <p>Hormone [2] 1:2 335:4</p> <p>horrible [1] 110:4</p> <p>Hospital [1] 148:19</p> <p>host [1] 171:22</p> <p>hour [5] 21:25 103:4 168:7 284:4 334:10</p> <p>house [7] 66:15 123:6 127:6 142:7 146:15 154:22 156:4</p> <p>Howell [28] 7:1 15:10,21 33:10,22 40:12,15 44:16 51:21 53:6,8,8,14 78:7 94:19,24 107:3 113:13 116:12 124:17 147:7 149:8 153:2,11,25 161:9 166:8 170:17</p> <p>Howell's [1] 148:24</p> <p>human [1] 317:6</p> <p>hundreds [6] 196:18 270:4,7,18 324:21 327:22</p> <hr/> <p style="text-align: center;">-I-</p> <hr/> <p>idea [14] 60:19 182:15 194:10 195:14 216:13 221:3,24 223:4,10 230:22 289:20 291:9,20 313:14</p> <p>ideas [2] 35:18 271:16</p> <p>identified [5] 76:13 86:6 126:17 173:2 304:17</p> <p>identifies [3] 242:20,22 243:6</p> <p>identify [6] 122:25 150:5 172:21 225:15 248:23 302:3</p> <p>identifying [4] 46:17,18 243:1 303:5</p> <p>identity [1] 195:8</p> <p>image [1] 228:5</p> <p>immediant [1] 226:6</p> <p>immediate [8] 39:4 70:3 167:16,18 172:8,19 173:24 300:14</p> <p>immediately [2] 225:16 230:23</p> <p>immunohistochemistry [1] 294:2</p> <p>impact [13] 4:5 18:12 64:11 67:10 71:7 76:6 136:14 212:6 215:2 235:4 236:3 267:8 288:22</p> <p>impacted [14] 46:21 79:4 108:18 111:16 115:16 142:20 214:3 215:13,21 224:2 266:25 268:5,11 268:22</p> <p>impacting [2] 108:14 114:5</p> <p>impacts [1] 294:2</p> <p>implement [2] 243:14 245:14</p> <p>implementing [1]</p>	<p>245:21</p> <p>implication [3] 151:10 214:12 272:15</p> <p>implications [3] 165:23 166:10 214:1</p> <p>implicit [1] 226:20</p> <p>importance [4] 76:7,20 78:9 227:16</p> <p>important [11] 20:18 83:18 151:13,13 153:9 303:6,10,11,22,24 304:6</p> <p>impossible [1] 148:8</p> <p>impression [14] 4:17 100:23 108:23 165:25 307:25 308:2,5 309:7 314:12 316:21 329:5,8 330:11,20</p> <p>impressions [1] 331:20</p> <p>improvement [1] 165:24</p> <p>improvements [3] 54:25 74:9 76:6</p> <p>improves [1] 213:6</p> <p>inaccuracies [8] 170:24 172:8 256:21 303:15,17 303:22 304:20 307:24</p> <p>inaccuracy [4] 303:25 304:7,8 314:11</p> <p>inaccurate [3] 27:9 163:20 167:22</p> <p>Inadequate [1] 165:8</p> <p>inadvertently [1] 28:21</p> <p>incident [2] 84:9 187:11</p> <p>include [9] 18:10 28:18 114:12 242:1 254:21 256:5 258:14 260:7 279:23</p> <p>included [10] 28:20 29:6 41:20,22 47:16,21 101:12 135:25 154:21 170:16</p> <p>includes [1] 242:24</p> <p>including [11] 18:4 32:25 49:11 124:16 141:23 143:25 145:3 157:7 190:6 231:25 331:25</p> <p>inconsistent [2] 276:23 278:21</p> <p>incorrectly [1] 304:17</p> <p>Indeed [1] 180:1</p> <p>indefensible [1] 113:9</p> <p>Independent [11] 34:4 61:17,21 63:10 78:4 84:1 174:15,18,25 175:9 308:10</p> <p>index [1] 228:20</p> <p>indicate [7] 34:18 46:15 204:24 207:24 240:10 269:3 319:14</p> <p>indicated [14] 24:25 48:12 52:24 74:9 83:3 222:19 257:2 265:19 287:20,24 294:15 300:1 313:7 322:17</p> <p>indicates [1] 117:6</p>	<p>indicating [2] 94:21 179:17</p> <p>indicative [1] 125:22</p> <p>individual [30] 32:23 35:14 76:13 79:23 83:1 105:22 107:19 111:25 113:21 163:14 172:9 185:13,17 186:14 196:24 201:25 203:19 225:11 237:15 262:19 269:6 270:3 280:13 282:19 283:2 284:4 307:8 314:17 329:9 332:15</p> <p>individual's [1] 212:6</p> <p>individually [2] 262:10 295:22</p> <p>individuals [55] 6:25 14:16 15:6 17:11 20:20 27:8,16,19 31:11,18 46:21,22 47:17,21 49:18 49:20,22 50:2 79:4,6,7 79:13 110:8,12 112:2,7 112:12,14 115:10,16 121:24 141:22 165:11 179:21,22 185:22 219:19 219:24 259:4,6,22 260:3 268:5,12 270:2,7,13 271:5 273:4 284:1,2 285:8 293:17 314:25 315:9</p> <p>ineffective [1] 125:24</p> <p>ineffectively [1] 111:5</p> <p>infection [1] 302:18</p> <p>inference [1] 179:10</p> <p>influence [2] 224:22 238:9</p> <p>inform [6] 35:4 100:19 133:20 175:3 268:5,11</p> <p>information [93] 5:25 6:3,5 8:14,24 9:7 11:5 12:6,24 18:10,21,23 19:1 35:14 42:12,13 53:16 56:14 62:16 63:23 64:9 64:10,13,20,22 66:4 67:6 67:17 79:3 82:14 85:17 85:20 86:1,5 87:12 90:8 90:12 102:2 103:6 120:15 123:10 132:25 133:23 141:18 162:2 167:20 179:20,22 203:19 206:23 207:2 212:4,4 215:12 228:12 234:17,24 252:12 252:12 254:3,9 257:4 258:13 266:24 267:9 273:18,23 274:19 275:4 276:19 277:4 282:1 283:18 284:13 286:2,13 286:21 287:13 289:19,22 290:4,5,17 291:10,19 293:1,25 294:4 300:15 301:8,16,18 315:14</p> <p>informed [13] 10:20 11:2 12:20,23 85:23 86:23 87:15 105:12,20,21,22 163:13 289:9</p> <p>informing [4] 94:20 102:18 175:8 194:1</p> <p>inhibitor [1] 27:20</p> <p>inhibitors [3] 18:13 48:3</p>	<p>64:12</p> <p>initial [4] 50:4 110:17 286:7 313:2</p> <p>initiate [1] 188:8</p> <p>initiated [3] 108:20 188:10 234:8</p> <p>initiating [1] 191:16</p> <p>initiative [1] 243:25</p> <p>input [8] 42:20 56:16 159:16 160:6 199:22 231:6,10 280:7</p> <p>inquiries [1] 305:19</p> <p>Inquiry [8] 1:1 137:15 183:14 244:20 246:1,2 335:4,7</p> <p>insight [1] 74:8</p> <p>insofar [4] 184:24 238:8 238:8 262:17</p> <p>instance [2] 189:12 247:18</p> <p>instilling [1] 211:12</p> <p>institution [2] 216:23 228:1</p> <p>insurability [1] 236:3</p> <p>insurance [8] 214:20,23 224:10 225:5 232:1,6,15 236:1</p> <p>Integrated [2] 1:10,16</p> <p>integrity [1] 227:11</p> <p>intended [3] 250:19 279:22 289:3</p> <p>intention [1] 212:19</p> <p>intentionally [1] 112:20</p> <p>interacting [1] 152:1</p> <p>interaction [2] 124:4,7</p> <p>interactions [1] 252:13</p> <p>interest [10] 108:10 140:22 209:25 211:2 212:21 221:6 230:8 297:15,17 315:22</p> <p>interested [5] 24:5 178:18 180:16 221:8 330:18</p> <p>interesting [1] 165:15</p> <p>interests [1] 209:12</p> <p>interim [1] 202:20</p> <p>internal [9] 75:13,14 76:15 154:23 205:18 208:13 248:19 252:15 287:12</p> <p>internally [2] 23:21 119:5</p> <p>interpret [1] 131:18</p> <p>interpretation [1] 131:10</p> <p>interpreted [2] 325:5 328:5</p> <p>interpreting [2] 100:25 131:13</p> <p>interview [8] 5:17 7:3 10:8,10 11:1 308:25 309:1 327:7</p> <p>interviews [12] 13:8,21 22:1,6,11 24:11 34:19</p>
--	---	--	--	--

<p>61:24 307:7,9,22 312:24 introduction [1] 286:8 investigated [1] 316:22 investigating [1] 228:17 investigation [1] 241:1 invite [1] 34:21 invited [1] 43:8 involve [1] 160:15 involved [49] 14:10,17 15:5,13,25 16:3 55:19 79:6,11 81:12 102:18 117:12 129:6 137:2,4,7 137:20,21 146:20 160:14 170:15 184:10 185:9,15 185:16,18,19,24 186:15 190:12 194:15,22 196:20 197:11,14 198:4 217:17 245:3 248:20 252:17 258:22 262:24 264:23 265:3 274:1 275:11 285:17 288:2 312:12 involvement [10] 86:20 142:2,2 147:9 149:15 170:19 183:9 222:3 262:11 265:2 involves [2] 149:9 191:23 involving [5] 7:21 126:10 160:10 195:14 306:24 isolated [1] 81:23 issue [118] 3:16 35:9 57:2 66:2 69:7 71:9 72:11,12 72:22 74:19 76:20 87:16 102:9 108:7,7,12 110:9 110:14 111:4,13,19,22 111:24 112:1,10,10,13 112:16 122:12,20 123:6 123:6,20 135:19 136:12 136:21,24,25 139:15,25 143:7 145:13,17 147:16 150:8 154:3 161:24 165:12,13 167:21,25,25 169:8 170:16 172:14 184:3,12 185:2,13 187:13 196:1,7,14,15 197:18 206:24 210:7,8 213:9 217:17 219:19 222:10 227:7 229:3 230:17 236:25 242:2,20 243:3,3 244:6,15 245:16,23 246:11 248:1,7,12 249:3 249:10 255:16 262:12,15 262:24 266:5,10 271:12 274:1 284:25 288:18 289:17 290:2 296:8 300:3 300:6,12 301:2,11 302:15 302:19,22 304:13 305:21 312:25 314:23 315:11 319:22 331:2 issues [28] 57:3 73:6 75:18 123:12 133:22 135:23 141:2 148:9 150:1 191:10 233:18 241:21 259:20 262:18 263:17 265:4,9 266:4 269:16 271:1 273:2 292:6 297:19 305:13,14 312:10 314:1 315:3</p>	<p>issuing [1] 180:22 it'll [3] 37:23 94:1 302:16 italics [1] 189:10 item [15] 178:7,8,18 188:7,15 189:3,19 213:1 213:2,18 223:15 235:22 235:25 268:2 287:23 itemized [1] 168:4 itself [11] 4:5 18:11 23:23 55:24,25 61:1 131:8 137:17 150:15 276:15 302:9</p> <hr/> <p style="text-align: center;">-J-</p> <p>Jane [2] 1:9 44:18 Janeway [2] 174:1,7 January [5] 78:2,6 79:18 80:17 92:22 jargon [2] 168:24 282:16 Jeff [2] 165:14 327:8 Jennifer [4] 1:14 2:6 241:8,14 job [14] 12:16,18 123:9 144:4 184:22 222:20 229:1 238:6 258:7 261:17 261:25 262:8 270:21 293:23 John [4] 8:14 141:15,24 154:8 John's [6] 81:18 127:8 171:12 182:10 335:8,11 join [1] 33:25 Jonathan [1] 5:17 Josephine [1] 141:21 journalism [2] 111:22 111:23 journalists [1] 172:9 Judy [2] 335:2,13 July [14] 20:16 25:12 204:25 206:1,3 208:16 226:11 233:11,11 249:17 266:15 295:2 300:8,23 jump [1] 108:5 June [11] 1:4 154:23 159:8 161:15 163:19 165:2 169:18 170:12 235:12 335:5,12 jury [1] 220:16 Justice [2] 1:3 335:6</p> <hr/> <p style="text-align: center;">-K-</p> <p>K [1] 189:19 Kara [4] 1:9 33:11 44:17 45:8 keen [1] 18:20 keep [3] 107:20 123:9 255:18 keeping [1] 255:15 key [14] 33:13 41:16 42:25 78:9 105:3 132:24 134:23 135:2,5 140:24 193:1 217:19 232:7 243:6 kind [22] 15:18 19:1 40:9</p>	<p>42:16 69:20 75:11,23 83:22 120:6 124:11 126:23 133:17 201:8 213:9,9 238:2 259:8,10 259:11 264:4 313:3,9 knew [26] 21:1 24:16,18 30:1 64:13 73:15 74:2 87:24 92:7 96:21 97:6 97:17 99:3 100:4,5 106:8 106:9,11 111:1 142:6 194:24 195:4,8 226:22 270:3,6 knowing [3] 13:3 43:12 108:10 knowledge [17] 112:1 156:4 157:14 188:9,12 188:13 190:4,8,10 199:5 202:2 243:2 254:6 290:14 310:24 313:25 314:10 knowledgeable [1] 302:8 Knowlton [1] 218:17 known [8] 29:22 77:1 102:15 106:2,18 188:18 234:11 237:24 knows [3] 105:5 121:2 133:21</p> <hr/> <p style="text-align: center;">-L-</p> <p>lab [28] 21:4 22:6 34:22 158:20 159:18 165:8 166:4,17 209:11,16,21 209:23 210:7,9,9,23 211:7,8,21 226:24 227:7 227:8,11 228:14,24 229:1 276:22 278:20 laboratory [10] 21:7 54:22 74:10 167:4 185:9 210:1,11 211:13 227:13 312:5 labour [1] 129:15 Labrador [5] 213:25 241:15 327:20 335:8,11 Labrador-Grenfell [1] 1:15 labs [2] 215:3,5 lack [7] 6:5 45:10 257:17 293:9 300:11,25 301:12 lady [1] 124:25 Laing [14] 1:9 7:2 15:10 15:22 21:23,25 33:11 40:13,14 44:17 51:22 61:22 175:7 199:18 land [2] 302:20 332:13 landed [1] 29:4 language [1] 9:4 large [6] 72:11 163:11 184:2 245:3 270:12 318:8 larger [6] 4:25 11:20 196:10 212:7 245:22 253:16 largest [2] 224:22 296:14 last [25] 7:25 8:9 18:5,17 24:13 58:1 110:17 111:3 135:20,22 146:2 172:21 204:21 213:2 215:1</p>	<p>238:22 241:17 249:16,25 257:1 277:20 279:10 299:25 311:8 326:18 late [9] 76:4 117:1 151:16 183:10 234:12 253:12 284:4 300:8 309:2 latter [1] 33:15 lawsuit [11] 35:10 65:3 66:3 67:11 71:7 77:3 88:10 106:5 140:3 233:2 234:7 lawyer [17] 32:25 103:17 103:21,23 104:14 115:4 192:17 224:10,11,16,18 224:24 225:5 232:2,6,16 232:22 lawyers [4] 103:5 176:8 220:12,16 lay [1] 291:24 lead [6] 28:25 39:4 188:19 206:24 270:24 276:24 leaders [1] 272:19 leadership [3] 136:23 136:25 154:2 leading [3] 64:18 88:3 139:24 leads [2] 6:10 7:17 learn [4] 155:11 164:6 284:3 289:10 learned [3] 61:22 72:10 233:8 learning [1] 21:5 learnings [1] 255:7 least [11] 29:9 43:17 53:9 64:14 70:12 114:22 116:14 181:22 182:16 200:23 201:4 leave [8] 91:10 95:15,15 108:22 149:3 272:22 314:12 331:20 leaving [3] 71:18,20 158:20 led [1] 237:18 left [8] 100:23 158:13 179:23 275:12 316:21 329:6,24 330:10 legal [10] 44:7 71:21 72:15 102:7 103:12 108:20 180:20 182:17 223:23 224:9 leisure [1] 213:7 length [4] 57:10 72:13 168:2 249:18 Leona [15] 6:23 33:11 33:20,23,25 39:23 44:17 51:22 57:19 66:12 78:8 78:15,20 81:24 84:2 Leona's [2] 42:19 58:8 less [9] 45:8 107:11 112:11 137:21 220:25,25 308:3,6 327:24 letter [55] 101:18 149:10 150:12,15,19,20 151:1 151:22 154:7 172:12 178:12 197:1,12,24</p>	<p>198:22,25 199:6,13,18 200:2,10,22 201:3,12,15 201:23 202:1,4 216:5,13 225:13,19,21,24 263:22 263:25 264:10,12,19,20 265:20 268:3 273:9,11 273:17,23 274:6,9,20,24 275:11,18,21 286:22 295:8 letterhead [2] 138:8,19 letters [6] 125:7 199:20 215:13,21,23 266:24 letting [2] 87:8 108:11 level [11] 84:4 109:1 142:1,2 174:4 280:24 289:6 291:19 310:24 312:11 313:25 levels [1] 135:22 liars [1] 108:3 lies [1] 293:20 life [2] 237:8 245:10 liked [1] 57:4 likely [2] 144:13 196:16 limitations [1] 65:4 limited [7] 35:10 86:1 86:23 126:14 190:8 268:11 314:9 Linda [1] 171:24 line [14] 104:22 141:18 173:15 215:12 225:25 226:16 236:20 237:10,12 237:20 244:5 266:24 270:18 293:17 lines [3] 213:2 221:5 274:19 link [1] 279:21 list [7] 75:11 79:10 81:21 127:2 179:18 180:4 231:25 listed [3] 41:11 75:10 235:16 listen [2] 113:3 265:25 listened [1] 165:13 lists [1] 192:9 literally [1] 20:4 litigation [6] 213:24 214:9 233:21 234:1,18 234:23 live [2] 140:20 173:6 living [3] 29:11 245:6,9 ll [1] 214:14 local [2] 302:20,21 log [1] 92:5 logistically [1] 62:14 long-term [1] 160:11 longer [2] 137:11 176:2 look [46] 7:19 19:18 26:21 27:3,10 31:19 37:9 38:11 41:15 93:24 97:5 107:11 109:6 111:20 113:20 121:2 123:24 124:13 130:2 137:23 141:19 144:13 150:7,21 151:2 157:1 164:18 176:5 178:8 184:18 185:13</p>
--	--	--	--	---

<p>199:16 205:9 228:22 254:8 255:9 293:22 294:19 304:24 309:21 315:14 318:3 319:8 325:12,18 326:13 looked [11] 19:8,19 36:25 36:25 113:24 178:3 199:6 238:3 295:15 326:3 327:1 looking [32] 8:17 18:5 18:23 19:14 42:17,24 43:13 48:18 57:23 59:6 65:6 69:20 90:15 122:12 137:24 142:14 152:5 166:18 187:5 189:24 192:8 222:10 235:22 239:23 243:1 266:13 268:10,23 272:13 297:9 308:1 327:14 looks [2] 162:25 180:23 lost [5] 202:14 253:24 254:1,1,2 lots [4] 232:19 293:12,16 295:13 LUNCH [1] 177:14 luncheon [1] 177:12 luxury [1] 304:23 lying [1] 107:25</p>	<p>managing [5] 168:6,9 168:12,22 169:1 mandate [1] 287:3 manner [1] 61:18 manual [1] 180:18 map [1] 243:6 mapping [2] 222:20 242:25 March [6] 85:16 87:21 87:21 127:11 138:14 236:16 Margaret [1] 335:6 marginally [1] 55:2 Mark [1] 327:18 marketing [1] 220:10 mass [1] 285:17 mat [3] 178:1,5,7 material [14] 40:25 41:8 45:10,18,20,22,25 56:8 68:8 69:15 176:3,7 241:3 277:18 materials [20] 39:20 40:2,21 44:19 45:15 52:10 99:9 109:25 119:15 121:20,24 122:25 130:13 130:15,21 244:19 254:12 257:4,20 259:7 matter [19] 4:11 17:15 23:5,10 24:5 44:24 53:10 65:17 73:12 88:18 98:20 153:16 183:9 199:5 212:20 215:5 243:11 247:7 335:3 matters [3] 72:15 152:20 159:16 Matthews [1] 141:24 may [107] 8:23 9:18 12:25 13:1 17:19 27:6,7,13 30:3 35:8 43:3 44:4 59:17,25,25 60:23 71:19 71:20 82:20 83:3 85:10 85:12 87:20 89:11,16 97:2,15 101:8,11,13 102:2,24 107:1 117:7,22 119:12 122:16 123:18 124:15 127:20 130:12 132:4 136:18 137:7,17 137:17 138:19 140:8 141:15 142:20 143:5 145:9,25 146:8,14 148:13 150:19 151:1,15 152:24 154:12,18,20 155:19 164:15 171:19 172:22 174:13 176:11 177:2 186:20 190:5,11 191:15 193:1 196:15,16 200:9 202:13 205:15 219:20,20 222:25 232:22 244:11 253:6 255:16 257:18 263:24 267:15 277:1 278:17,24 279:12,18 281:20 284:5 304:22,22 310:2 312:5,15,15 319:14 323:16 324:25 326:19 mean [48] 24:17 27:15 29:17 42:5 48:1 73:8 78:10 87:14 110:14 111:19 113:18 115:12,13</p>	<p>120:5 123:5 125:22 126:4 135:19 140:18 161:24 174:6 186:24 189:16 196:17 203:8 209:21 211:5,10,15,17 217:6 248:14 250:11 251:5,8 263:16 264:3 265:7,16 265:17 268:22 269:22 280:17 288:5 292:20 294:9 319:8 332:9 meaning [2] 47:8 301:21 meaningful [1] 169:7 means [10] 190:25 225:13 236:5 256:14 275:3 283:11 284:7 291:3 295:9 335:10 meant [7] 8:9 107:10 112:16 166:19 168:22 174:12 251:8 meantime [2] 176:13 284:1 measures [2] 160:11 253:14 mechanism [1] 280:14 mechanisms [1] 282:11 media [164] 3:20 6:18 8:2 8:4,24 9:19,20,21 10:24 11:5 12:21 13:1,16,17 13:20 17:24 18:8,20 21:6 21:12,14 22:4,8,19 24:5 24:12,19,22,22 25:3 26:7 33:18 34:1,19,21 37:11 37:19,24 38:22 39:20 46:10 48:15,16,18 50:5 50:12 53:21 59:11 61:3 62:2,9,18 63:14 64:13 64:19 65:2,6,15,22 66:1 67:1,20 70:3,12 73:3 85:20,25 88:2 89:16 95:22 99:12 100:8,16,19 100:20 101:7,17 103:10 105:6,12,15 106:15,16 107:10 108:11,16 109:5 109:7,12 111:7,20,20 112:10 114:9 123:17,25 130:15 136:18 137:25 138:10,20,23 139:3,19 140:12 141:3 144:8 147:6 148:2,4 152:1 154:24 157:7 159:3 164:15 165:20 167:3,22 168:5,7 170:24 171:9,22 172:20 172:22 173:2 174:5 196:15 234:6 278:18 282:10 286:1,10 288:2,6 288:12 290:7,22 291:4 292:7,20 294:10 302:1 302:17,20,25 303:3,5,14 303:17 305:6,18 306:15 306:24 307:2 309:8 314:18,18,19 316:10,13 316:16 330:10,18 media's [4] 54:9 65:18 97:12 140:1 medical [9] 59:2 180:23 181:9 193:19 195:15 225:10 257:16 262:20 269:5 Medicine [1] 185:9 meet [1] 188:17</p>	<p>meeting [22] 3:12 8:15 17:16 33:23 35:19 43:24 44:20 45:3 51:11,15,24 94:20 128:24 170:21 190:11 206:14 217:18 235:11,23 255:24 256:16 300:9 meetings [9] 123:13 217:18 255:8,12,14,17 256:13 288:18,19 member [2] 104:13 275:15 members [6] 1:12 146:15 170:15 200:22 238:1 315:2 memo [39] 154:23,24 155:5 156:3 158:7 159:8 204:22,25 205:1,2,10 206:13,21 207:2,3 208:6 208:7,16 209:10 212:9 216:19 217:14,15,21 218:8 223:18 224:21 227:5,9 249:17 250:15 250:19,23 251:4 266:15 287:23 288:10 300:21 301:5 men [1] 282:21 mentality [1] 107:22 mention [2] 191:25 232:1 mentioned [9] 9:3 37:17 37:17 163:1 218:10 241:17 249:15 252:23 301:25 merged [1] 183:16 merger [1] 182:17 merit [2] 296:16,17 message [14] 78:14,22 83:22 105:1 135:5 276:18 277:7,12 281:7 290:2 291:3 323:9 330:17 332:4 messages [15] 33:13 41:16 42:25 78:9,19 110:10 132:24 135:2,24 136:3 161:23 243:6 280:12,19 303:1 messaging [8] 130:24 132:14 133:14,14,22 134:23 135:13,16 messed [1] 111:1 met [7] 18:1 36:21 67:11 119:5 129:7 158:1 160:2 MHAs [2] 146:11 148:13 middle [1] 87:19 midnight [1] 130:18 midst [2] 171:20 175:10 mighn't [1] 40:13 might [39] 21:22 48:19 58:8,13 83:24 92:6 121:16 124:10 133:1 142:9 150:12 164:7 167:3 167:9 175:9 177:12 183:15 202:7 204:1 221:24 246:17 254:16 261:12 264:9 271:25 272:24,25 275:10 277:12 286:11 297:7 313:14</p>	<p>314:9,11 315:20,21 316:21 322:4 324:11 million [1] 210:2 millions [1] 210:23 Mills [1] 1:8 mind [19] 54:9 73:15 176:9 177:5 194:9 195:13 214:7 224:9,12 246:17 259:5 271:4 274:5 281:14 284:10 287:5 316:21 320:22 323:21 minds [2] 246:20 295:14 minister [20] 3:11,15,22 4:7 19:4 24:23 66:15 67:12 99:3 103:3 122:11 122:16 132:10 133:20 200:21 226:5 230:25 235:24,24 300:9 minister's [1] 4:10 ministerial [2] 215:14 267:1 minute [3] 144:24,24 327:1 minute-by-minute [1] 123:11 minuted [2] 255:18 256:13 minutes [4] 121:15 255:15 334:2,10 misdirected [1] 238:13 misinformation [1] 331:25 misinformed [1] 105:13 mislead [2] 103:8 104:7 misleading [1] 326:25 misled [2] 103:9 237:19 misrepresented [1] 167:21 missed [4] 78:4 80:17 163:22 165:20 mistake [3] 6:9 7:16 12:10 mistakes [4] 6:10 7:17 12:11 237:16 mitigating [1] 118:16 Moira [1] 141:24 moment [11] 13:24 108:4 110:20 111:15,18 206:22 207:1 216:9 225:22 227:6 228:15 moms [2] 220:2,3 Monday [11] 8:17 10:6 10:9 33:24 34:1,20 57:6 63:13 95:23,25 145:9 monitor [4] 302:15,23 303:2 313:24 monitored [1] 70:2 monitoring [7] 143:10 144:9 148:1 307:1 314:4 314:18,23 monitors [1] 302:1 month [2] 29:24 92:24 months [6] 6:2 12:7 53:22 201:4 245:22 288:19</p>
<p>-M-</p>				
<p>m [1] 237:9 ma'am [33] 6:12 7:19 17:22 24:25 32:6 33:9 35:24 37:22 39:19 42:7 44:14 50:5 51:10 53:20 63:13 73:12 76:23 79:17 86:3 87:18 105:8 109:6 110:23 113:11 114:3,8 124:13 125:8,8 166:12 167:14 292:12 317:4 machinery [2] 56:2,2 Madam [1] 283:17 mail [5] 130:15 149:11 150:2,21 309:3 mails [2] 113:5 199:17 maintain [5] 72:16 209:10,13 226:24 228:5 maintained [1] 251:16 maintaining [6] 209:16 209:20,22 211:8 227:11 227:25 Majesty [1] 1:8 major [4] 24:19 46:9 57:25 105:13 majority [2] 269:24 331:23 makes [8] 103:7 104:6 232:20 237:16 238:21 254:4 271:24 289:12 maligned [1] 107:7 mammography [1] 163:1 manage [3] 169:4 178:8 253:15 management [8] 169:1 218:22,25 219:6 223:24 235:12 247:1 259:5</p>	<p>managing [5] 168:6,9 168:12,22 169:1 mandate [1] 287:3 manner [1] 61:18 manual [1] 180:18 map [1] 243:6 mapping [2] 222:20 242:25 March [6] 85:16 87:21 87:21 127:11 138:14 236:16 Margaret [1] 335:6 marginally [1] 55:2 Mark [1] 327:18 marketing [1] 220:10 mass [1] 285:17 mat [3] 178:1,5,7 material [14] 40:25 41:8 45:10,18,20,22,25 56:8 68:8 69:15 176:3,7 241:3 277:18 materials [20] 39:20 40:2,21 44:19 45:15 52:10 99:9 109:25 119:15 121:20,24 122:25 130:13 130:15,21 244:19 254:12 257:4,20 259:7 matter [19] 4:11 17:15 23:5,10 24:5 44:24 53:10 65:17 73:12 88:18 98:20 153:16 183:9 199:5 212:20 215:5 243:11 247:7 335:3 matters [3] 72:15 152:20 159:16 Matthews [1] 141:24 may [107] 8:23 9:18 12:25 13:1 17:19 27:6,7,13 30:3 35:8 43:3 44:4 59:17,25,25 60:23 71:19 71:20 82:20 83:3 85:10 85:12 87:20 89:11,16 97:2,15 101:8,11,13 102:2,24 107:1 117:7,22 119:12 122:16 123:18 124:15 127:20 130:12 132:4 136:18 137:7,17 137:17 138:19 140:8 141:15 142:20 143:5 145:9,25 146:8,14 148:13 150:19 151:1,15 152:24 154:12,18,20 155:19 164:15 171:19 172:22 174:13 176:11 177:2 186:20 190:5,11 191:15 193:1 196:15,16 200:9 202:13 205:15 219:20,20 222:25 232:22 244:11 253:6 255:16 257:18 263:24 267:15 277:1 278:17,24 279:12,18 281:20 284:5 304:22,22 310:2 312:5,15,15 319:14 323:16 324:25 326:19 mean [48] 24:17 27:15 29:17 42:5 48:1 73:8 78:10 87:14 110:14 111:19 113:18 115:12,13</p>	<p>120:5 123:5 125:22 126:4 135:19 140:18 161:24 174:6 186:24 189:16 196:17 203:8 209:21 211:5,10,15,17 217:6 248:14 250:11 251:5,8 263:16 264:3 265:7,16 265:17 268:22 269:22 280:17 288:5 292:20 294:9 319:8 332:9 meaning [2] 47:8 301:21 meaningful [1] 169:7 means [10] 190:25 225:13 236:5 256:14 275:3 283:11 284:7 291:3 295:9 335:10 meant [7] 8:9 107:10 112:16 166:19 168:22 174:12 251:8 meantime [2] 176:13 284:1 measures [2] 160:11 253:14 mechanism [1] 280:14 mechanisms [1] 282:11 media [164] 3:20 6:18 8:2 8:4,24 9:19,20,21 10:24 11:5 12:21 13:1,16,17 13:20 17:24 18:8,20 21:6 21:12,14 22:4,8,19 24:5 24:12,19,22,22 25:3 26:7 33:18 34:1,19,21 37:11 37:19,24 38:22 39:20 46:10 48:15,16,18 50:5 50:12 53:21 59:11 61:3 62:2,9,18 63:14 64:13 64:19 65:2,6,15,22 66:1 67:1,20 70:3,12 73:3 85:20,25 88:2 89:16 95:22 99:12 100:8,16,19 100:20 101:7,17 103:10 105:6,12,15 106:15,16 107:10 108:11,16 109:5 109:7,12 111:7,20,20 112:10 114:9 123:17,25 130:15 136:18 137:25 138:10,20,23 139:3,19 140:12 141:3 144:8 147:6 148:2,4 152:1 154:24 157:7 159:3 164:15 165:20 167:3,22 168:5,7 170:24 171:9,22 172:20 172:22 173:2 174:5 196:15 234:6 278:18 282:10 286:1,10 288:2,6 288:12 290:7,22 291:4 292:7,20 294:10 302:1 302:17,20,25 303:3,5,14 303:17 305:6,18 306:15 306:24 307:2 309:8 314:18,18,19 316:10,13 316:16 330:10,18 media's [4] 54:9 65:18 97:12 140:1 medical [9] 59:2 180:23 181:9 193:19 195:15 225:10 257:16 262:20 269:5 Medicine [1] 185:9 meet [1] 188:17</p>	<p>meeting [22] 3:12 8:15 17:16 33:23 35:19 43:24 44:20 45:3 51:11,15,24 94:20 128:24 170:21 190:11 206:14 217:18 235:11,23 255:24 256:16 300:9 meetings [9] 123:13 217:18 255:8,12,14,17 256:13 288:18,19 member [2] 104:13 275:15 members [6] 1:12 146:15 170:15 200:22 238:1 315:2 memo [39] 154:23,24 155:5 156:3 158:7 159:8 204:22,25 205:1,2,10 206:13,21 207:2,3 208:6 208:7,16 209:10 212:9 216:19 217:14,15,21 218:8 223:18 224:21 227:5,9 249:17 250:15 250:19,23 251:4 266:15 287:23 288:10 300:21 301:5 men [1] 282:21 mentality [1] 107:22 mention [2] 191:25 232:1 mentioned [9] 9:3 37:17 37:17 163:1 218:10 241:17 249:15 252:23 301:25 merged [1] 183:16 merger [1] 182:17 merit [2] 296:16,17 message [14] 78:14,22 83:22 105:1 135:5 276:18 277:7,12 281:7 290:2 291:3 323:9 330:17 332:4 messages [15] 33:13 41:16 42:25 78:9,19 110:10 132:24 135:2,24 136:3 161:23 243:6 280:12,19 303:1 messaging [8] 130:24 132:14 133:14,14,22 134:23 135:13,16 messed [1] 111:1 met [7] 18:1 36:21 67:11 119:5 129:7 158:1 160:2 MHAs [2] 146:11 148:13 middle [1] 87:19 midnight [1] 130:18 midst [2] 171:20 175:10 mighn't [1] 40:13 might [39] 21:22 48:19 58:8,13 83:24 92:6 121:16 124:10 133:1 142:9 150:12 164:7 167:3 167:9 175:9 177:12 183:15 202:7 204:1 221:24 246:17 254:16 261:12 264:9 271:25 272:24,25 275:10 277:12 286:11 297:7 313:14</p>	<p>314:9,11 315:20,21 316:21 322:4 324:11 million [1] 210:2 millions [1] 210:23 Mills [1] 1:8 mind [19] 54:9 73:15 176:9 177:5 194:9 195:13 214:7 224:9,12 246:17 259:5 271:4 274:5 281:14 284:10 287:5 316:21 320:22 323:21 minds [2] 246:20 295:14 minister [20] 3:11,15,22 4:7 19:4 24:23 66:15 67:12 99:3 103:3 122:11 122:16 132:10 133:20 200:21 226:5 230:25 235:24,24 300:9 minister's [1] 4:10 ministerial [2] 215:14 267:1 minute [3] 144:24,24 327:1 minute-by-minute [1] 123:11 minuted [2] 255:18 256:13 minutes [4] 121:15 255:15 334:2,10 misdirected [1] 238:13 misinformation [1] 331:25 misinformed [1] 105:13 mislead [2] 103:8 104:7 misleading [1] 326:25 misled [2] 103:9 237:19 misrepresented [1] 167:21 missed [4] 78:4 80:17 163:22 165:20 mistake [3] 6:9 7:16 12:10 mistakes [4] 6:10 7:17 12:11 237:16 mitigating [1] 118:16 Moira [1] 141:24 moment [11] </p>

<p>moreover [1] 107:21 morning [36] 3:8 13:6 13:13 36:3 57:6 60:6 66:11 81:25 104:17 106:23 116:5 117:7 118:9 125:14 128:3 129:13,23 130:7,20,24 131:24 132:12 133:10 134:16 135:15 136:10 141:25 142:1 165:14 166:7 171:10 233:16 266:22 327:8 334:7,18 Moss [2] 335:2,13 most [18] 20:18 45:8 82:15 110:16 111:21,23 112:1,3,14 185:23 186:8 186:11,25 198:25 259:1 270:1 299:9 326:14 mostly [1] 124:20 Mount [1] 324:20 move [8] 189:2 204:12 213:1 217:23 225:14 232:20 305:1,2 moved [3] 29:5 179:19 180:4 moving [1] 215:10 Ms [1212] 2:2 3:3,6,7,10 3:13,17,24 4:13,22 5:4 5:21 6:3,15 7:6,11,21,22 7:23,24 8:12,18,20 9:14 9:15,24 10:3,13,19 11:11 11:17,22 12:1,12,17 13:12,19 14:6,11,15,22 15:1,9,10,14,20,24 16:4 16:9,15,19,23 17:2,8,12 17:18,25 18:19 22:14 23:1,7,14,18 24:1,6,17 25:7,14,18,23 26:3,11 26:15,19 27:2 28:6,12 28:16 29:2,12,16 30:9 30:13,17,24 31:5,10,16 31:23 32:2,9,15 33:5 34:6,10,15 36:2,13,18 37:4,25 38:5,9,19 39:1,7 39:11,16,21 40:11 41:1 41:7,18,24 42:4,10,23 43:9,21 44:1,9,21 45:12 45:17 46:1,6,11 47:2,7 47:14 48:10,22 49:1,8 49:12 50:7,11,16,23 51:3 51:7,12,16,20 52:6,11 52:15,22 53:5,11,20,24 54:5,12,19 55:11,16,22 56:6,9,12,13,17,21 57:1 57:15,20 58:3,7,12,18 58:22 59:4,9,16 60:7,11 60:18 61:2,10 62:24 63:4 63:15,21 64:7 65:9,19 65:25 66:18,20 67:2,9 67:15,23 68:3,7,9,16,20 69:6,11,16,24 70:5,9,16 70:22 71:1,5,14,18,25 72:8,25 73:4,20,24 74:5 74:22 75:2,6,17,25 77:5 77:12,19 78:7,12,25 79:19 80:2,8,12,20 81:9 82:1,10 83:8,14,21,23 83:24 84:13,17,25 85:6 85:11 86:7,11,17,22 87:3 87:10,22 88:7,16 89:4,8 89:12,18 90:5,9,21,25</p>	<p>91:7,11,15,19,23 92:2 92:16,21 93:2,6,11,15 93:20 94:6,10,15,25 95:5 95:12,21 96:1,5,8,13,18 96:24 97:3,11,13,16,24 97:25 98:2,4,6,13,21,24 99:5,11,17,20 100:2,13 100:18 101:14,21,25 102:12,17 103:18,22 104:2,8,15 105:10,24 106:4,10,14 109:10,16 109:23 110:24 112:22 113:14 114:13,17,24 115:9 116:4,8,11,16,23 117:3,9,13,18,23 118:2 118:7,14 119:17,20,22 120:1,7,14,23 121:4,10 121:15 122:1,6,10,17,21 123:1,22 124:6,17,21 125:12,19 126:12 127:16 128:23 129:9,22,24 130:10 131:5,6,6,12,17 131:23 132:1,5,11,13,17 133:7,16 134:3,10,14,20 134:25 135:6,14 136:8 136:20 137:3,9,19 138:2 138:9,16,21 139:5,11,16 139:21 140:13,17 141:23 141:23 142:5,11,15 143:5 143:13,17 144:7,21,25 145:4,8,16,20,25 146:9 146:17,22 147:4,14,21 147:25 148:16,23 149:12 149:17,21,25 150:6,11 150:23 151:4,9 152:2,12 152:16 153:5,15,22 154:9 154:14,25 155:4,8,12,16 155:21,25 156:9,17 157:3 157:10,18,23 158:2,8,19 158:24 159:9,13 160:12 160:20 161:2,7,8,10,14 161:21 162:5,12,17,24 163:6,16,21 164:1,8,14 164:19,23 165:3,4 166:15 166:23 167:5,10 168:14 168:18,23 169:12,17,21 169:25 170:5,9,13,18 171:1,5,13,17,25 172:4 172:11,24 173:3,8,12,16 173:21 174:3,19,22,23 174:24 175:1,3,5,16,21 176:3 177:23 178:9,13 178:15,21 179:3,7,15,16 180:3,10 181:1,6,11,16 181:24 182:19 183:2,19 184:16,23 185:6 186:5 186:10,23 187:6,15,24 188:4,11,22 189:4,13,20 190:1,9,21 191:1,6,20 192:4,10,14,18 193:5,12 193:16 194:6,11,19 195:1 195:5,10,17,21 196:22 196:23 197:3,7,10,13,21 198:1,6,10,13,14,18,19 199:8,14 200:4,13,18,25 201:5,10,19,24 202:10 202:15,19 204:23 205:6 205:23 206:4,11 207:12 207:17,21 208:3,17,22 209:2,24 211:19,25 212:13 213:13,20 214:4 214:10,21 215:7,10,16 216:1,6,16,19,25 217:5</p>	<p>217:12 218:3,12,18,24 219:7,12,17 220:7,13,23 221:9,14,21 222:1 223:6 223:11,19 224:1,6,13,17 224:25 225:7 226:16 227:2,22 228:7 229:11 229:16,20 230:1,11,19 231:4,15,19 232:3,8,17 233:3,13,23 234:3,10,13 234:20 235:1,13,17 236:6 236:21 237:14,25 238:4 238:5,16 239:5,13,17,19 239:22,22 240:2,9 241:7 241:8,9,10,11,13,23,25 242:3,5,7,9,12,14,17 243:13,16,22,24 244:22 244:25 245:2,5,12,17,19 245:24 246:3,5,7,13,15 246:21,23 247:3,20 248:2 248:5,8,10,13,25 249:5 249:9,12,14,22,24 250:1 250:3,7,10,13 251:1,7 251:10,12,14,18,20,23 251:25 252:2,4,6,8,20 252:22 253:1,3,5,7,11 254:13,17,20,23,25 255:2 255:4,6,22 256:2,4,8,12 256:17,19,23,25 257:8 257:10,14,24 258:3,5,9 258:11,15,19,21,23,25 259:13,15,17,19,21 260:1 260:6,9,14,17,19,22 261:4,11,12,14,19,21,24 262:3,6,9,16,22 263:3,6 263:10,12,15,19,21 264:7 264:11,13,15,25 265:6 265:13,15,23 266:9,11 266:17,19 267:3,5,12,14 267:18,20,23,25 268:14 268:16,19,21,25 269:2 269:12,14,17,19,21 270:8 270:10,22 271:10,20 272:4,17 273:5,13,15,19 273:21 274:2,4,7,12,21 274:23,25 275:2,6,8,13 276:1,8,10,12,14 277:8 277:10,15,17,19,24 278:1 278:4,6,8,11,14,16 279:6 279:9,15,17 280:2,4,10 280:21 281:1,3,6,10,15 281:17,23,25 282:3,5,7 283:4,7,13 284:9,15,17 284:19,22 285:3,5,12,14 285:19,23 286:4,6,16,18 286:23,25 287:8,10,17 287:19 288:16 289:14,23 289:25 290:8,9,20,25 291:2,6,8,13,17,21,23 292:3,5,11,18,23,25 293:5,11,14 294:5,12,14 294:25 295:6,11,24 296:3 296:5,12,18,22 297:4,12 297:16,20,25 298:6 299:5 299:15,20,23,24 300:13 300:20 301:3,9,14,17,22 301:24,25 302:5,10,12 303:4,7,9,12,23 304:3,5 304:10,15,21 305:3,8,10 305:12,15,17,22,25 306:2 306:10,22 307:4,11,13 307:15,17,21 308:4,13 308:16 309:5,11,13,18 309:20 310:5,7,9,11,15</p>	<p>310:18,20,22 311:1,4,7 311:10,12,15,19,21,23 311:25 312:3,7,13,19,20 312:22 313:16,19,21 314:5,8,16,21 315:7,17 315:19,24 316:1,4,6,8 316:14,24 317:1,3,8,10 317:13,20,22,25 318:2,5 318:7,9,11,22,24 319:2 319:18,20 320:4,9,11,17 320:20,23,25 321:4,6,8 321:10,12,16,18,20,23 321:25 322:11,13,16,19 322:22,24 323:1,3,5,7 323:10,13,15,16,20,22 323:24 324:1,7,9,12,15 324:17 325:1,3,8,10,15 325:17,19,22,25 326:2,4 326:7,9,12,22,24 327:2 327:4,11,16 328:1,3,8 328:11,13,16 329:2,4,7 329:12,14,21 330:1,3,6 330:8,12,14,21,23,25 331:8,21 332:2,7,9,17 332:24 333:1,3,16,20,22 333:25 334:3,5,9,13,15 multiple [8] 175:12 185:19 272:7 305:11,13 305:13,14 324:5 multitude [1] 76:18 Mundon [44] 3:13 5:13 6:15 7:21,23 8:12 9:14 17:17 56:6,12 60:6 66:9 68:9 83:23,24 85:14 87:2 95:21 96:5 97:11,14,24 98:2,5,21 99:20 119:13 119:20 121:15 129:24 130:12 131:6,23 132:11 143:5,21 145:8,25 149:9 161:15 162:23 174:24 175:3,5 Mundon's [1] 174:22 mus [1] 210:4 musings [1] 207:6 must [10] 31:3 45:16 49:16 103:4,8 107:17 108:1 120:8 189:9,9</p>	<p>neatly [1] 214:11 necessarily [4] 5:8 203:20 222:18 280:15 necessary [5] 148:2 176:10,11,25 263:9 need [10] 49:17 105:5 126:17 127:3 145:11,13 160:7 172:22 214:1 293:25 needed [4] 36:5 53:17 154:3 254:5 needs [4] 61:6 113:21 243:20,25 negative [16] 19:19,21 100:4 125:4,8 126:2 269:6,9 276:22,24 278:25 288:3 318:14 320:15 324:22 326:17 negatively [3] 108:14 108:17 114:5 negatives [1] 327:25 negativity [1] 174:5 neglected [1] 189:2 negotiate [1] 270:19 negotiating [1] 73:7 never [25] 37:18,19 38:21 55:12 76:17 102:19 110:19 111:16 112:13 157:21 158:1 162:6 175:10 189:16 202:2 211:4 212:19 217:21 226:11 257:15 289:2 290:15 291:14,15 323:11 new [9] 46:24 108:24 109:1 213:6 225:18 289:19 290:16 300:15 301:7 Newbury [254] 1:14 2:6 240:2,9 241:7,8,9,13,14 241:25 242:5,9,14 243:13 243:22 244:22 245:2,12 245:19 246:3,7,15,23 247:20 248:5,10,25 249:9 249:14,24 250:3,10 251:1 251:10,14,20,25 252:4,8 252:22 253:3,7 254:13 254:20,25 255:4,22 256:4 256:12,19,25 257:10,24 258:5,11,19,23 259:13 259:17,21 260:6,14,19 261:4,14,21 262:3,9,22 263:6,12,19 264:7,13,25 265:13,23 266:11,19 267:5,14,20,25 268:16 268:21 269:2,14,19 270:8 270:22 271:20 273:5,15 273:21 274:4,12,23 275:2 275:8 276:1,10,14 277:10 277:19 278:1,6,11,16 279:9,17 280:4,21 281:3 281:10,17,25 282:5 283:4 284:9,17,22 285:5,14,23 286:6,18,25 287:10,19 289:14,25 290:9,20 291:2 291:8,17,23 292:5,18,25 293:11 294:5,14 295:6 295:24 296:5,18 297:4 297:16 299:23,24 300:20 301:9,17,24 302:10 303:4 314:2</p>
--	---	--	--	--

-N-

<p>303:9,23 304:5,15 305:3 305:10,15,22 306:2,22 307:11,15,21 308:13 309:5,13,20 310:7,11,18 310:22 311:4,10,15,21 311:25 312:7,19 313:16 313:21 314:8,22 315:7 315:19 316:1,6,14 317:1 317:8,13,22 318:2,7,11 318:24 319:18 320:4,11 320:20,25 321:6,10,16 321:20,25 322:13,19,24 323:3,7,13,17,20,24 324:7,12,17 325:3,10,17 325:22 326:2,7,12,24 327:4,16 328:3,11,16 329:4,12,21 330:3,8,14 330:23 331:8 332:2,9,17 333:1,16,22,25 334:3,9</p> <p>Newfoundland [5] 241:15 326:15 327:20 335:8,11</p> <p>news [10] 101:8 143:23 156:1 165:7,12 167:23 223:22 309:15 324:3 325:11</p> <p>newsletter [1] 219:20</p> <p>newspaper [2] 277:22 278:2</p> <p>Newsworld [3] 140:19 140:20 143:25</p> <p>next [29] 6:16 8:17 13:7 22:6,11 85:25 109:4 129:8,13,23 140:7 159:21 168:6,11 170:3 172:19 173:7 180:14 192:7 193:3 225:9 237:10 248:22 305:1,2 318:16 321:17 325:11 334:2</p> <p>niche [1] 304:22</p> <p>night [5] 110:6,7 128:18 128:24 129:13</p> <p>nine [2] 220:21 309:14</p> <p>NL [2] 1:8,14</p> <p>NLMA [3] 273:9 275:21 275:22</p> <p>nobody [4] 76:9 111:2 113:17 126:6</p> <p>nominal [1] 144:9</p> <p>non-medical [1] 55:2</p> <p>none [1] 199:3</p> <p>note [15] 19:3 24:21,23 45:9 78:2 101:19 131:25 132:4,8 134:8 156:20 167:16 189:18 236:14 279:4</p> <p>notebooks [1] 255:13</p> <p>noted [4] 124:24 125:4 125:13 190:19</p> <p>notes [16] 40:12,15 45:7 53:13 59:23 60:15,15,17 60:19,21 128:8 135:25 138:1 140:9 157:6,13</p> <p>nothing [10] 12:2 73:9 87:24 97:8 125:3 151:6 196:19 218:1 245:20 287:4</p> <p>notice [1] 78:21</p>	<p>noticed [1] 146:1</p> <p>notification [5] 196:2,8 296:19 298:25 331:6</p> <p>notifications [1] 84:19</p> <p>notified [9] 79:24 164:4 180:9,12 230:23 295:8 298:10,17,19</p> <p>notify [13] 84:5 179:1,14 180:2 225:12 294:20 295:4 296:20,20 297:24 298:7 299:8,10</p> <p>notifying [2] 79:6 295:22</p> <p>November [28] 3:11,15 5:13 6:14,15,20,24 7:4 7:10,22,23 10:2,6,7,8,9 10:10,18 16:13 30:12 54:4 68:1 76:5 99:4 230:14 233:1 234:12 311:14</p> <p>now [108] 6:11,12 7:3,18 8:18 17:22 19:24 24:25 25:10 35:24 40:8 42:2 43:16,17,25 44:14 49:7 51:10 56:5 79:9 80:16 82:2 83:20 84:6 87:18 87:21 99:13 101:6 102:6 102:22 103:14 105:8 115:1 117:12 121:14 126:3 130:19 133:13 136:2,17 137:24 138:6 139:2 145:23 148:13 149:6 152:24 154:5,17 155:3,19 156:12 157:1 159:7 160:19 161:18 162:10 163:19 166:3,12 167:13,25 169:10,13 175:25 187:5 192:13 197:11 200:9 203:8 215:19 223:18 225:22 229:14 230:10 233:7 236:10 237:19 241:7 246:8,19 248:17 249:15 250:11 252:3 257:1 261:15 262:11 267:6 279:3 288:4 300:21,22 301:25 306:20 308:8 309:7 313:22,22 318:3 320:5 324:14 327:5,5,6 327:17 328:12 332:5</p> <p>NTV [1] 34:4</p> <p>nuances [4] 288:7,13 290:23 292:9</p> <p>number [72] 4:15,16,24 5:14 6:24 18:1,1 19:15 20:19 25:17,21 26:9,10 27:17,21 28:10 29:7 31:9 31:14,17,18 32:1,14,17 38:13,15 40:2 41:13 44:25 46:20 47:16 48:18 50:21 51:6 54:15 55:4 55:18 62:17 67:7 79:16 85:15 90:2,17 99:10 108:13 121:23 124:16 125:21 141:22 162:16 178:10 180:16 181:25 182:3 188:8 203:11 205:11 208:2 258:16 265:10,18 270:12 277:6 279:19 319:4,6 321:13 324:20 328:25 331:19</p>	<p>332:8,13</p> <p>numbered [2] 124:25 223:16</p> <p>numbers [68] 18:24 19:2 19:8,10,12 20:6 25:12 26:21,21 27:10,23 29:25 30:2,4,8,12,19,20 31:1,4 31:6,14 32:24 33:6 36:8 48:12 50:12,17 62:20 67:16,18 68:1 69:7,7,10 70:19 90:15 91:8 92:3,4 92:6,8 93:5,9 94:9 97:18 98:8,10,23 99:2,3,10,13 99:14 100:25 108:19 139:9,10,25 236:12 329:19 332:10 333:5,8 333:11,11,13,18</p> <p>numerators [1] 25:5</p> <p>numerous [3] 49:19 79:7 260:12</p> <p>nurses [1] 187:20</p> <p>nursing [1] 186:3</p> <hr/> <p style="text-align: center;">-O-</p> <hr/> <p>o'clock [2] 128:25 129:1</p> <p>O'Dea [3] 1:15 239:19 239:22</p> <p>O'Neill-Yates [2] 5:18 6:4</p> <p>obligation [1] 35:4</p> <p>observed [1] 232:25</p> <p>obtained [1] 43:20</p> <p>obtaining [1] 193:23</p> <p>obvious [4] 59:15 192:24 219:2 270:11</p> <p>obviously [2] 6:1 285:8</p> <p>occasion [1] 184:14</p> <p>occasional [2] 88:3,21</p> <p>occasionally [1] 329:15</p> <p>occassion [2] 9:23 12:2</p> <p>occupied [1] 195:9</p> <p>occur [4] 66:17 171:14 171:18 172:1</p> <p>occurred [8] 40:22 41:4 46:16 58:1 85:9 148:18 174:8 189:11</p> <p>occurrence [4] 188:9,10 305:7,9</p> <p>occurs [3] 269:24,25 270:11</p> <p>October [25] 37:24 38:1 39:6 75:5 178:11 179:12 201:12 202:21 276:3 292:14 308:25 309:2,16 311:13 316:10,15 317:15 319:15 325:23,24 326:3 327:6 329:17 332:10 333:14</p> <p>off [11] 29:5 53:22 148:6 166:11 179:1 200:2 231:25 247:17 287:21 320:7 332:12</p> <p>offensive [1] 110:14</p> <p>offer [1] 266:6</p> <p>offered [6] 8:8 27:23</p>	<p>46:25 50:3 128:16 266:10</p> <p>offering [1] 82:12</p> <p>office [7] 4:11 58:17 142:4 144:14 148:3,24 278:10</p> <p>officer [3] 277:6 279:19 286:12</p> <p>offices [1] 123:5</p> <p>official [12] 203:11 249:21 250:12 251:5,11 251:15 252:1,11,19 253:10 254:15 255:11</p> <p>officially [1] 286:13</p> <p>officials [2] 324:19 327:19</p> <p>often [3] 87:15 238:12 275:14</p> <p>olive [3] 8:10 9:11 14:1</p> <p>once [12] 8:12 9:13 14:2 42:8 86:1 88:19 94:1 108:20 228:18 240:25 298:8 323:21</p> <p>oncologist [1] 279:13</p> <p>oncologists [8] 55:24 185:7 225:14,16 268:4,8 291:10 296:24</p> <p>one [137] 5:15 7:4,5 11:21 15:16 19:11 20:16 21:16 22:20 26:2,4,6 32:23 36:15,21 37:16 47:17 48:21 49:19 54:3,13,14 55:6,12 57:12 59:22 66:13 72:9,21 74:19 75:5 76:11 82:17 86:14 89:20 89:21 90:6 95:11 102:23 107:14 108:8 110:16 111:8 113:4,8 114:3 116:7 118:17 121:25 126:25 130:11 134:18 142:16 143:11 146:7 148:17,17 151:20,21,22 162:22,22 163:10 168:8 174:23 175:11,24 182:9 185:23 187:1,4,5 193:20 193:24 201:25 205:17 207:1,1,4 208:1,1,25 209:17 210:8 212:9 213:17 215:19 216:19,20 217:10,20 222:7 223:18 225:1 229:24 230:2 231:12 233:7 241:2,19 243:14,19 244:13 246:16 247:12 249:20 253:19,25 254:1 255:7 270:2,17 274:14 278:21 281:8 286:1 293:25 296:14 299:25 304:16 305:20 306:20 311:8,13 313:10 313:20 315:15 317:21,23 319:25 324:10 325:20,23 325:24 326:3,10,25</p> <p>ones [6] 15:18 19:23 41:11 59:14 159:17 298:3</p> <p>onslaught [1] 111:7</p> <p>onto [1] 169:16</p> <p>open [5] 35:17 163:12 173:15 238:14 293:17</p> <p>open-line [1] 171:23</p>	<p>opened [2] 68:24,24</p> <p>openly [1] 39:15</p> <p>opens [1] 66:16</p> <p>operate [1] 166:17</p> <p>operates [1] 165:24</p> <p>operating [1] 305:1</p> <p>opinion [27] 14:16 15:15 88:18,25 104:13 129:4 209:11 216:8 219:18,22 223:7 228:10 263:16,18 265:9 266:6 267:2 268:1 269:8,11 296:7,15,17 297:2,3,6 302:13</p> <p>opinions [4] 210:5 243:3 266:10 272:25</p> <p>opportunities [4] 24:11 49:22 152:9 173:24</p> <p>opportunity [14] 8:25 9:9 21:13 35:6 115:11 160:6 161:22 176:5,13 211:5 224:3 228:13 277:1 278:23</p> <p>opposed [17] 45:21 73:10 143:2 159:17,18 182:10 210:15 214:15 229:4 267:10 270:17 294:10 304:2 312:9 331:17,19 332:22</p> <p>opposite [1] 136:12</p> <p>Opposition [1] 141:17</p> <p>option [1] 211:10</p> <p>options [1] 300:22</p> <p>order [2] 175:2 300:17</p> <p>organization [44] 65:1 80:15 83:7 84:23 101:1 107:6,24 110:3 118:18 124:9 126:16 137:14 158:21 182:6 184:6 195:24 206:16 207:20 209:15 212:7,24 214:24 222:25 227:15,21 229:2 229:10 230:3,4 238:20 247:5,8 248:14,22 249:7 256:11 258:17 260:11 261:8 264:4 286:14 294:8 302:9,14</p> <p>organizations [4] 73:5 79:9 126:20 247:10</p> <p>organize [2] 191:16,18</p> <p>organized [2] 148:25 192:25</p> <p>organizing [1] 148:22</p> <p>original [12] 37:11 42:18 42:19 45:3,10,15,18,22 80:21 149:18 199:1 250:9</p> <p>originally [10] 8:23 19:14 21:20 37:9 61:13 78:15 125:13 226:3 295:12 306:16</p> <p>originated [1] 230:15</p> <p>Oscar [13] 6:18 7:1 33:10 44:16 45:2,7 57:14 60:20 60:20 107:3 113:12 149:8 166:8</p> <p>otherwise [1] 69:4</p> <p>ourselves [5] 9:19,21</p>
---	---	---	--	--

<p>64:24 111:2 213:4 outcomes [2] 35:5 213:6 outline [3] 188:7 240:23 249:6 outlined [3] 19:2 61:5 230:18 outlines [2] 208:9 247:6 outside [14] 74:3 75:19 79:8 126:10 127:6 171:11 190:22 193:23 196:5 205:20 219:5 242:6 268:7 297:9 outstanding [1] 144:4 overall [10] 160:10 202:22 318:19 319:3,22 320:12 322:8 329:1 331:11,18 overlap [3] 194:18 270:11,23 oversight [2] 201:9,11 overstating [1] 227:16 owed [1] 228:11 own [28] 4:10 32:6 33:19 58:17 72:3 91:2 97:20 106:9,11 111:17 112:15 112:18 128:1,11 131:16 135:23,23 144:8 148:3,7 238:8 240:24 253:22 254:4 267:2 271:13,18 272:20 ownership [1] 135:18</p>	<p>P-0837 [1] 141:14 P-0841 [2] 142:14 143:4 P-0845 [1] 143:20 P-0869 [1] 145:7 P-0870 [1] 145:23 P-0884 [1] 146:13 P-1274 [1] 164:18 P-1401 [1] 57:8 P-1408 [1] 6:22 P-1410 [1] 57:9 P-1417 [1] 106:20 P-1421 [1] 167:13 P-196 [1] 66:7 p.m [23] 6:24 7:23 44:15 45:4 78:6,22 85:16 101:9 102:24 107:2 117:2 119:12 121:15,23 124:15 141:15,21 143:22,25 146:1,6 154:18 334:19 pack [1] 108:2 pack' [1] 108:2 Packet [2] 151:23 172:12 page [53] 7:14 57:13,24 58:21 66:10 78:1 81:6 106:25 130:11 132:22 137:24 138:5,8 150:16 150:17,21 159:21 162:21 170:8 180:16 188:8 192:7 193:3,4 202:19,21,24 205:12 208:2 213:2 215:11 223:14 230:12,16 235:10,20 236:12,17 237:10,19 266:14,21 268:2 287:23,24 309:14 309:24 317:14 324:14 325:11 327:5,17,17 pages [2] 101:7 135:12 Pam [1] 124:18 panel [4] 27:18 31:12 82:12 141:1 panelled [1] 298:16 panelling [4] 18:15 49:5 222:13 298:4 paper [4] 58:14 160:4,17 161:4 papers [2] 161:17 171:11 paragraph [26] 57:25 104:18 122:5 142:23 168:3 178:19 189:7 209:1 209:14 213:3,17 215:2 223:16 225:9 266:21 268:1,2 269:3 276:16 277:20 279:10 287:24 309:22,23 318:16 324:18 paragraphs [5] 124:25 317:4 318:4 325:12 326:13 paraphrase [1] 312:17 Pardon [1] 16:22 Parsons [2] 198:19 260:8 part [36] 18:4 23:11 34:20 61:9 94:2 99:14 104:19,19,25 106:17 126:3 133:20,21 136:9 168:3 189:15 191:17</p>	<p>196:9,11 199:19 211:16 211:16 229:1 237:23 262:7 265:7 282:24 286:12,15 293:20 295:9 295:25 297:13 314:23,25 321:7 participate [1] 88:6 participating [2] 88:9 267:22 particular [43] 16:16 24:18 26:2,4,6 30:2,3 72:21 79:16 110:9 122:12 142:6 154:1 158:12 169:8 182:2 183:7 184:8 206:22 210:8 211:1 212:17 216:2 216:8 217:14 224:14 227:9 240:15 259:23 265:1 267:17 269:25 279:23 288:18 290:19,19 296:7 309:17 316:9 317:19 319:1 325:13 327:10 particularly [10] 64:2 122:24 142:22 152:21 186:20 224:2 281:8 284:24 288:2 306:24 parties [1] 185:19 parts [1] 149:2 party [1] 32:20 pass [3] 144:5 169:16 204:15 passed [3] 5:7 198:22 264:20 passing [1] 104:15 past [10] 142:24 160:25 166:5 169:8 211:6 213:5 226:3 318:20 320:13,14 pastoral [3] 193:6,11,19 Pat [1] 7:2 patently [1] 110:19 Pathologist [1] 165:9 pathologists [3] 55:23 185:7 312:11 pathology [1] 294:1 patient [66] 20:16 35:16 78:4 82:16 85:20 178:12 185:10 186:21 188:18,20 189:16 190:7 196:1,2,10 211:15 213:12 216:24 221:25 225:17,20 236:15 236:23 238:11 257:3 259:3 260:4,10,13,15 261:7 262:19 263:17 264:12 265:4 266:1 269:15,23,25 271:2,6,7 272:3 274:13,18 279:18 280:7 281:13 282:15,24 283:15,20,22 284:12,20 285:1,7,10 286:3,11,14 287:16 288:3,5 297:24 331:5 patient's [5] 82:5 189:1 189:10 276:23 278:22 patient-specific [1] 194:20 patients [127] 4:5 5:7 12:9 18:14 19:15,19,20 19:21,22 29:18 32:1</p>	<p>37:13 38:13 46:19 48:20 51:6,8 79:6,12 81:20 82:11,25 105:5,12,20,20 106:9,18 108:10,18 151:6 151:11 162:6,7 163:12 163:13,22 164:4 183:21 183:21,24 184:1,24 185:21 191:23,24 194:2 196:4,9,12,24 197:25 200:12,23 201:14 212:21 215:13,21,24 216:13 221:13,18,20 222:12 224:2 225:12,24 226:19 228:11,25 230:23 231:1 231:24 232:13 237:9 238:1,17 258:13 259:7 262:5,7,14 265:21 266:25 267:7,8,9,15 268:17 270:15 273:25 274:14 275:5 276:25 277:5,13 278:23 279:4,24 280:19 281:20 282:8 285:16,17 285:25 286:9 287:14 289:7,8 291:11,25 294:3 294:20 295:4,7,23 296:20 297:15,18 298:3,8,9,25 299:8,10 310:1 322:10 Patricia [1] 276:5 patronizing [1] 289:3 pay [3] 144:10,10,17 pays [1] 144:8 PC [3] 253:24 254:2,2 PCs [1] 254:4 pending [4] 66:3 233:21 234:1,23 Peninsula [1] 244:1 Pennell [2] 230:16 312:21 people [57] 10:12 57:12 70:13 71:21,24 74:2 85:15 108:14 111:25 112:15,19 113:24 114:6 124:16 125:21 126:1,1,2 129:3,5,5 158:9 161:25 162:1 182:14 218:21 220:20 221:5 224:20 229:1,5 233:8 240:13 254:1 255:8 256:6 258:1 258:16 259:1,24 260:2 261:2 265:8 271:11,15 291:25 293:2,6,7 305:23 315:21 322:4 324:20 327:19 328:21 329:23 330:9 people's [1] 316:21 per [1] 183:24 percent [50] 23:4,5 24:4 26:1 27:25 28:11,24 29:4 36:10,10 37:16,19,20 38:3,4,10,16,18 39:6 312:25 313:1,8 318:12 318:14,19 319:3,10 320:1 320:3,21 321:21 322:7 322:18,21 324:21,23 325:5 326:17,18 327:24 328:5,9,23 329:1,10,20 329:24 331:1,10,11 percentage [11] 19:15 19:24 23:12 28:3 37:15</p>	<p>313:13 317:16 319:22 331:19 332:20,21 percentages [9] 18:24 19:13 23:11 26:22 29:3 331:16 332:1 333:9,19 perception [2] 179:11 221:7 perfect [1] 166:2 performance [1] 202:20 performed [8] 18:12 210:18 227:13 318:20 319:3,23 320:13 326:14 perhaps [30] 4:16,25 23:13 54:10 83:2 114:9 114:21 150:7,16 166:13 170:18 243:8 245:22 247:25 251:11 261:12 273:6 280:24 282:15 284:4,12 286:9 289:16 291:24 314:10 316:20 319:25 322:3 326:25 334:10 period [18] 5:7 32:1 49:17 64:16 123:13,14 156:14 168:7 170:4 172:21 222:12,22 240:1 274:15 280:1 316:11 319:7 329:9 permission [1] 175:15 permit [1] 179:10 persist [1] 300:11 person [20] 32:16 53:3 72:2 75:19 76:15,15 100:25 148:4 193:1 195:9 230:3 261:5,12 266:3 271:23 275:17 313:24 314:3,6,20 personal [8] 142:24 199:5 238:7 254:4 267:2 296:8 297:2,18 personally [1] 237:22 perspective [28] 12:16 12:20 24:14 32:7 36:24 43:17 53:2 54:22 65:18 72:3 73:14,19 76:14,23 87:23 99:25 111:6 115:6 131:15 140:16 148:21 175:14 207:22 247:15 253:8,19 264:23 333:2 pertaining [2] 262:12 265:4 pertinent [2] 184:21 242:22 Peter [7] 5:18 6:16 8:2,6 107:12 109:2 112:8 Pgs [4] 2:3,4,5,6 phone [11] 66:17 89:19 98:15,17 123:4 175:11 175:12 201:14,15 265:17 279:8 phoned [1] 90:20 phrase [1] 23:21 physician [15] 79:15 82:15,20,20,24 185:23 186:9,11 200:1 225:19 274:17 275:4 298:18 299:9,10</p>
<p>-P-</p>				
<p>P [4] 119:10 124:13 131:22 162:20 P-0032 [1] 77:24 P-0056 [1] 180:15 P-0104 [1] 56:3 P-0106 [1] 101:6 P-0154 [1] 230:10 P-0178 [2] 6:13,14 P-0180 [1] 5:12 P-0181 [2] 7:20 13:24 P-0183 [1] 33:8 P-0184 [1] 44:13 P-0189 [1] 121:13 P-0202 [1] 85:4 P-0227 [1] 161:14 P-0287 [1] 235:9 P-0304 [2] 204:20 287:22 P-0308 [1] 178:10 P-0345 [1] 309:14 P-0355 [1] 276:2 P-0431 [2] 77:25 78:1 P-0432 [2] 77:24 78:5 P-0443 [1] 137:23 P-0459 [1] 149:6 P-0462 [2] 150:18 152:6 P-0466 [1] 154:5 P-0481 [1] 192:7 P-0779 [1] 191:14 P-0831 [1] 130:10</p>	<p>Pack [1] 108:2 pack' [1] 108:2 Packet [2] 151:23 172:12 page [53] 7:14 57:13,24 58:21 66:10 78:1 81:6 106:25 130:11 132:22 137:24 138:5,8 150:16 150:17,21 159:21 162:21 170:8 180:16 188:8 192:7 193:3,4 202:19,21,24 205:12 208:2 213:2 215:11 223:14 230:12,16 235:10,20 236:12,17 237:10,19 266:14,21 268:2 287:23,24 309:14 309:24 317:14 324:14 325:11 327:5,17,17 pages [2] 101:7 135:12 Pam [1] 124:18 panel [4] 27:18 31:12 82:12 141:1 panelled [1] 298:16 panelling [4] 18:15 49:5 222:13 298:4 paper [4] 58:14 160:4,17 161:4 papers [2] 161:17 171:11 paragraph [26] 57:25 104:18 122:5 142:23 168:3 178:19 189:7 209:1 209:14 213:3,17 215:2 223:16 225:9 266:21 268:1,2 269:3 276:16 277:20 279:10 287:24 309:22,23 318:16 324:18 paragraphs [5] 124:25 317:4 318:4 325:12 326:13 paraphrase [1] 312:17 Pardon [1] 16:22 Parsons [2] 198:19 260:8 part [36] 18:4 23:11 34:20 61:9 94:2 99:14 104:19,19,25 106:17 126:3 133:20,21 136:9 168:3 189:15 191:17</p>	<p>196:9,11 199:19 211:16 211:16 229:1 237:23 262:7 265:7 282:24 286:12,15 293:20 295:9 295:25 297:13 314:23,25 321:7 participate [1] 88:6 participating [2] 88:9 267:22 particular [43] 16:16 24:18 26:2,4,6 30:2,3 72:21 79:16 110:9 122:12 142:6 154:1 158:12 169:8 182:2 183:7 184:8 206:22 210:8 211:1 212:17 216:2 216:8 217:14 224:14 227:9 240:15 259:23 265:1 267:17 269:25 279:23 288:18 290:19,19 296:7 309:17 316:9 317:19 319:1 325:13 327:10 particularly [10] 64:2 122:24 142:22 152:21 186:20 224:2 281:8 284:24 288:2 306:24 parties [1] 185:19 parts [1] 149:2 party [1] 32:20 pass [3] 144:5 169:16 204:15 passed [3] 5:7 198:22 264:20 passing [1] 104:15 past [10] 142:24 160:25 166:5 169:8 211:6 213:5 226:3 318:20 320:13,14 pastoral [3] 193:6,11,19 Pat [1] 7:2 patently [1] 110:19 Pathologist [1] 165:9 pathologists [3] 55:23 185:7 312:11 pathology [1] 294:1 patient [66] 20:16 35:16 78:4 82:16 85:20 178:12 185:10 186:21 188:18,20 189:16 190:7 196:1,2,10 211:15 213:12 216:24 221:25 225:17,20 236:15 236:23 238:11 257:3 259:3 260:4,10,13,15 261:7 262:19 263:17 264:12 265:4 266:1 269:15,23,25 271:2,6,7 272:3 274:13,18 279:18 280:7 281:13 282:15,24 283:15,20,22 284:12,20 285:1,7,10 286:3,11,14 287:16 288:3,5 297:24 331:5 patient's [5] 82:5 189:1 189:10 276:23 278:22 patient-specific [1] 194:20 patients [127] 4:5 5:7 12:9 18:14 19:15,19,20 19:21,22 29:18 32:1</p>	<p>37:13 38:13 46:19 48:20 51:6,8 79:6,12 81:20 82:11,25 105:5,12,20,20 106:9,18 108:10,18 151:6 151:11 162:6,7 163:12 163:13,22 164:4 183:21 183:21,24 184:1,24 185:21 191:23,24 194:2 196:4,9,12,24 197:25 200:12,23 201:14 212:21 215:13,21,24 216:13 221:13,18,20 222:12 224:2 225:12,24 226:19 228:11,25 230:23 231:1 231:24 232:13 237:9 238:1,17 258:13 259:7 262:5,7,14 265:21 266:25 267:7,8,9,15 268:17 270:15 273:25 274:14 275:5 276:25 277:5,13 278:23 279:4,24 280:19 281:20 282:8 285:16,17 285:25 286:9 287:14 289:7,8 291:11,25 294:3 294:20 295:4,7,23 296:20 297:15,18 298:3,8,9,25 299:8,10 310:1 322:10 Patricia [1] 276:5 patronizing [1] 289:3 pay [3] 144:10,10,17 pays [1] 144:8 PC [3] 253:24 254:2,2 PCs [1] 254:4 pending [4] 66:3 233:21 234:1,23 Peninsula [1] 244:1 Pennell [2] 230:16 312:21 people [57] 10:12 57:12 70:13 71:21,24 74:2 85:15 108:14 111:25 112:15,19 113:24 114:6 124:16 125:21 126:1,1,2 129:3,5,5 158:9 161:25 162:1 182:14 218:21 220:20 221:5 224:20 229:1,5 233:8 240:13 254:1 255:8 256:6 258:1 258:16 259:1,24 260:2 261:2 265:8 271:11,15 291:25 293:2,6,7 305:23 315:21 322:4 324:20 327:19 328:21 329:23 330:9 people's [1] 316:21 per [1] 183:24 percent [50] 23:4,5 24:4 26:1 27:25 28:11,24 29:4 36:10,10 37:16,19,20 38:3,4,10,16,18 39:6 312:25 313:1,8 318:12 318:14,19 319:3,10 320:1 320:3,21 321:21 322:7 322:18,21 324:21,23 325:5 326:17,18 327:24 328:5,9,23 329:1,10,20 329:24 331:1,10,11 percentage [11] 19:15 19:24 23:12 28:3 37:15</p>	<p>313:13 317:16 319:22 331:19 332:20,21 percentages [9] 18:24 19:13 23:11 26:22 29:3 331:16 332:1 333:9,19 perception [2] 179:11 221:7 perfect [1] 166:2 performance [1] 202:20 performed [8] 18:12 210:18 227:13 318:20 319:3,23 320:13 326:14 perhaps [30] 4:16,25 23:13 54:10 83:2 114:9 114:21 150:7,16 166:13 170:18 243:8 245:22 247:25 251:11 261:12 273:6 280:24 282:15 284:4,12 286:9 289:16 291:24 314:10 316:20 319:25 322:3 326:25 334:10 period [18] 5:7 32:1 49:17 64:16 123:13,14 156:14 168:7 170:4 172:21 222:12,22 240:1 274:15 280:1 316:11 319:7 329:9 permission [1] 175:15 permit [1] 179:10 persist [1] 300:11 person [20] 32:16 53:3 72:2 75:19 76:15,15 100:25 148:4 193:1 195:9 230:3 261:5,12 266:3 271:23 275:17 313:24 314:3,6,20 personal [8] 142:24 199:5 238:7 254:4 267:2 296:8 297:2,18 personally [1] 237:22 perspective [28] 12:16 12:20 24:14 32:7 36:24 43:17 53:2 54:22 65:18 72:3 73:14,19 76:14,23 87:23 99:25 111:6 115:6 131:15 140:16 148:21 175:14 207:22 247:15 253:8,19 264:23 333:2 pertaining [2] 262:12 265:4 pertinent [2] 184:21 242:22 Peter [7] 5:18 6:16 8:2,6 107:12 109:2 112:8 Pgs [4] 2:3,4,5,6 phone [11] 66:17 89:19 98:15,17 123:4 175:11 175:12 201:14,15 265:17 279:8 phoned [1] 90:20 phrase [1] 23:21 physician [15] 79:15 82:15,20,20,24 185:23 186:9,1</p>

<p>physicians [16] 40:4 79:7,11 82:17 83:2 85:2 187:19 198:23 199:6,9 199:13 273:9 274:9,10 280:8 286:22</p> <p>pick [2] 63:22 303:2</p> <p>picked [1] 332:15</p> <p>piece [21] 38:11 150:2 245:7 282:15 303:19 308:6,10,11,18,19,22,24 309:3 313:2 317:19 323:16 324:3,10,13 325:14 326:6</p> <p>pieces [1] 307:7</p> <p>Pilgrim [9] 7:2 15:10,21 124:18 161:10 170:18 178:13 261:12 276:5</p> <p>place [12] 20:12 187:1 193:1 222:24 223:2 241:20 244:8,18 246:16 246:19 252:11 253:15</p> <p>place.And [1] 20:14</p> <p>placed [2] 189:10 316:12</p> <p>places [4] 132:18,20 220:17 295:14</p> <p>placing [1] 62:2</p> <p>plainly [2] 75:9,23</p> <p>Plaintiffs [1] 77:10</p> <p>plan [31] 195:15 206:15 241:17,22 242:10,16,18 242:24 243:15,19 244:21 245:4,14,25 246:1,9,10 246:18,20,25 247:1,4,14 247:14,22 248:6,15 249:1 249:11 294:16 322:9</p> <p>plane [1] 126:22</p> <p>planned [3] 8:23 310:25 311:3</p> <p>planning [3] 127:13 245:6 253:19</p> <p>plans [1] 247:11</p> <p>plateau [2] 290:5,14</p> <p>play [3] 26:20 108:19 288:24</p> <p>played [1] 105:13</p> <p>playing [1] 106:17</p> <p>plus [2] 48:7 57:11</p> <p>point [101] 10:20 21:9 22:18 28:10 34:13 35:25 38:20,21 45:5 46:10 52:23 57:5,6 58:10 82:21 83:5 84:18 85:9 92:12 97:9,11 98:14 99:19,21 100:22 105:4 109:19 114:10 116:17 120:9 125:9 126:9 127:19 130:4 131:13 133:17 135:23 137:2,5 140:1,23 147:11 148:7 151:12,16,18 152:5 152:19,25 154:2 158:14 161:20 164:2 165:19 170:17,19 174:5 201:13 208:10,14,23 211:1 216:3 222:15 226:1,6,7,8,13 235:5 244:17 253:25 255:23 262:2 265:11 270:7 274:24 275:23,25</p>	<p>279:7 290:1,11,15 293:24 295:16 298:12,22 299:21 299:25 300:19 310:12,17 310:19 313:5,14 315:5 318:23 319:5,17 321:3 328:14</p> <p>pointed [3] 55:6 91:5 104:15</p> <p>points [8] 64:23 129:9 129:11,16,18 255:10,19 295:13</p> <p>policies [10] 181:25 182:4,7,16 183:15 184:21 185:5 190:5 191:9 216:23</p> <p>policy [20] 180:15,18 182:2 183:6 184:14 186:22,25 187:19 188:3 189:24 190:18 191:7 205:18 206:9 212:11 217:23 226:18 227:5,15 227:20</p> <p>poorly [1] 100:3</p> <p>portion [1] 163:4</p> <p>portions [1] 162:10</p> <p>portray [1] 289:12</p> <p>portrayed [1] 288:1</p> <p>posed [1] 54:3</p> <p>position [17] 20:22 21:10 73:16 96:22 101:2 102:11 128:11 186:2 195:4,9 296:16 306:16,17,19,20 313:24 315:12</p> <p>positive [14] 141:11 173:25 174:6,9 269:7,9 288:4 318:13 320:16 322:2,9 324:24 326:15 327:22</p> <p>positivity [2] 46:24 47:12</p> <p>possibility [2] 176:20 250:6</p> <p>possible [11] 11:4 141:10 171:10 188:17 202:11,16 208:10 215:19 249:20 274:3 310:1</p> <p>possibly [8] 109:5,7 193:19 209:6 225:19 230:8 281:2 322:6</p> <p>post [2] 275:21 277:22</p> <p>posted [1] 308:7</p> <p>potential [1] 211:20</p> <p>potentially [2] 49:23 245:15</p> <p>PowerPoint [9] 33:15 33:15 40:6,8 57:11 59:21 60:3,16 146:14</p> <p>PR [3] 276:22 278:25 279:2</p> <p>practice [3] 58:1 186:14 191:8</p> <p>pre-written [1] 254:7</p> <p>precise [2] 255:24 324:19</p> <p>Predham [16] 7:1 33:11 35:25 36:2 44:17 78:7 104:16 124:16 149:8 161:9 178:11 179:16</p>	<p>198:13 260:7 264:21 276:11</p> <p>predict [1] 320:7</p> <p>predicting [2] 50:1 330:5</p> <p>prediction [3] 329:17 329:23 332:18</p> <p>predictions [1] 331:13</p> <p>preempt [1] 160:5</p> <p>preferably [1] 171:10</p> <p>preference [1] 333:18</p> <p>prejudicing [1] 103:12</p> <p>premier [2] 154:22 156:3</p> <p>Premier's [1] 142:4</p> <p>preparation [9] 3:19 17:23 18:25 22:17 26:6 43:14 86:24 88:5 109:25</p> <p>preparations [1] 88:12</p> <p>prepare [7] 18:2 32:22 40:9 287:13 300:4,5,17</p> <p>prepared [14] 11:20 49:16 57:19 60:20,22 80:6 112:21 132:10 151:25 154:7 168:15 249:19 273:12 278:13</p> <p>preparing [14] 14:17 39:20 51:10 87:24 128:8 128:18 146:21,23 154:7 249:16 252:24 259:7 274:6 300:21</p> <p>presence [2] 130:23 194:4</p> <p>present [9] 20:5,9 21:6 30:20 36:22 138:10 192:9 192:21 307:9</p> <p>presentation [8] 8:8 40:5,6,8 59:18,21 60:4 60:16</p> <p>presented [7] 8:24 13:8 29:25 42:13 59:10 68:10 302:9</p> <p>presents [1] 258:1</p> <p>president [3] 127:3,24 309:25</p> <p>press [35] 33:14 41:17 43:2 65:23 69:19 73:13 107:14,23 113:16 116:18 117:21 118:10 119:2 123:13 128:5,10,19 136:18 138:5 147:17 152:24 153:2,9,18 215:12 226:2,4 266:23 287:6 290:10 293:22 295:2 300:17 330:16 333:4</p> <p>pressed [4] 65:1 122:11 122:16 319:21</p> <p>pressing [2] 32:6 46:10</p> <p>pressure [2] 64:24 333:7</p> <p>pressured [1] 333:6</p> <p>presumably [2] 25:5 104:23</p> <p>presume [3] 107:9 108:2 219:11</p> <p>presuming [1] 203:17</p> <p>pretty [5] 65:12 86:24</p>	<p>88:8 123:15 144:24</p> <p>prevail [1] 116:15</p> <p>prevent [3] 240:25 245:20,21</p> <p>previous [6] 21:24 61:15 103:10 139:24 247:10 279:12</p> <p>previously [2] 254:22 288:4</p> <p>primarily [2] 55:10 148:22</p> <p>primary [8] 22:20 55:13 211:7,11,12 214:19 294:9 302:6</p> <p>principles [4] 208:9 248:3,23 249:6</p> <p>print [2] 163:11 318:8</p> <p>printed [3] 139:23 151:19 172:16</p> <p>printing [1] 204:1</p> <p>priorities [6] 229:15,17 229:19,21,25 230:2</p> <p>Pritchard [3] 177:16 239:8,9</p> <p>Pritchard/Stephen [1] 1:8</p> <p>privacy [2] 86:15 90:11</p> <p>private [2] 107:4 110:10</p> <p>privy [1] 142:10</p> <p>proactive [1] 151:15</p> <p>problem [18] 27:6 37:5 55:10 73:17 75:12,13,14 84:19 203:14 204:10 233:19 240:11 303:14,16 317:6 319:11 323:25 329:23</p> <p>problematic [2] 162:11 163:5</p> <p>problems [4] 77:1 125:15 166:5,18</p> <p>procedure [2] 35:7 188:7</p> <p>procedures [1] 54:22</p> <p>proceed [1] 105:2</p> <p>proceeds [1] 102:9</p> <p>process [38] 21:1 32:21 39:23 46:17 49:2,5 66:5 72:10 77:6,8,15 79:5 102:10 103:16 105:14 137:14 140:6 165:18,23 166:17 168:11,21 169:6 203:24,25 248:17 254:11 255:19 257:23 277:5 282:25 295:5,7,22 297:13 298:4,18 299:2</p> <p>processes [7] 21:5 74:11 166:4 169:3,4 219:23 312:10</p> <p>produced [2] 241:3 280:20</p> <p>producers [2] 170:22 170:22</p> <p>producing [1] 89:22</p> <p>product [4] 42:19,19,22 203:23</p>	<p>profession [1] 220:6</p> <p>professional [3] 168:24 186:13 259:9</p> <p>professional's [1] 55:3</p> <p>professionals [2] 148:6 187:20</p> <p>progesterone [1] 146:15</p> <p>program [1] 260:23</p> <p>programs [1] 171:23</p> <p>progressing [1] 140:4</p> <p>prominent [1] 302:24</p> <p>promotion [1] 261:2</p> <p>promotional [1] 257:18</p> <p>prompt [1] 187:21</p> <p>proper [1] 207:10</p> <p>properly [3] 114:10 241:6 292:6</p> <p>proposals [2] 126:14 127:7</p> <p>propose [1] 200:2</p> <p>proposed [1] 6:20</p> <p>protected [2] 35:15 77:21</p> <p>protocol [3] 20:21 210:21 292:16</p> <p>prove [1] 163:19</p> <p>proved [2] 162:11 163:4</p> <p>provide [19] 14:7 19:6 35:6 49:22 62:19 78:23 97:21 107:6 128:21 129:3 160:6 169:11 211:13,14 228:11 231:8,20 241:5 296:7</p> <p>provided [18] 9:20 19:3 40:12 56:16 57:4 63:24 64:22 68:8 74:8,16 120:15 138:10,20,22,24 199:21 206:23 261:17</p> <p>provider [1] 35:16</p> <p>providing [7] 18:8 62:16 64:8 231:6 269:11 286:13 314:18</p> <p>province [2] 128:15 179:23</p> <p>provincially [1] 167:23</p> <p>provision [1] 190:13</p> <p>psychologist [1] 186:13</p> <p>public [74] 5:25 6:3 9:8 12:7,9 35:5 64:25 72:24 73:1 77:2 80:18 93:18 100:24 102:8 103:10 105:6,16 106:17 107:15 108:23 113:22 155:20 168:1 196:7,8,9,11 200:23 207:22 209:12 210:1 211:13 212:18 214:2,16 215:11,20 223:16 225:23 226:7,20 228:9,12 238:13 252:16 262:15,17,18 266:1,2,4 266:5,23 267:11 271:2,9 272:1 281:18 283:1,11 288:6,12 290:2,6,18,22 291:4 292:7,20 294:11 298:11,21 299:3 302:13</p>
--	--	--	---	---

<p>public's [1] 289:4 publicly [11] 12:5 54:3 70:13 107:5 108:18 114:8 116:14 119:2 238:7,14 280:20 pull [8] 146:25 147:2 148:5 219:18,23 220:2 244:19 293:24 pulled [3] 40:2,3 156:10 pulling [7] 40:1 94:19 140:20 148:9 228:18 254:11 282:1 purpose [10] 49:21 87:8 133:2 135:9 136:17 149:24 250:21,22 292:14 302:6 purposes [3] 168:6 251:11 302:4 pursue [1] 195:14 purview [1] 272:20 put [26] 14:2 40:14 65:4 75:9 109:20 113:6 123:19 126:14 127:4 178:2 205:14 206:7 208:1,4 215:19 223:1 228:13 233:16 244:17 245:8 253:15 257:22 277:20 332:5 333:6,7 putting [3] 203:24 210:3 313:12 puzzle [1] 209:6 puzzles [1] 235:8</p>	<p>78:17 79:2,25 80:4,10 80:14,23 81:3,7,11 82:8 83:6,11,17 84:8,15,21 85:3,8,13 86:9,13,19 87:1,7,17 88:4,13 89:2,6 89:10,14 90:3,7,18,23 91:4,9,13,17,21,25 92:13 92:19,25 93:4,8,13,17 94:3,8,12,23 95:2,10,24 96:4,11,15,20 97:1,10 97:23 98:3,11,19 99:1,7 99:15,22 100:10,15 101:5 101:16,23 102:5,14,21 103:20,24 104:4,10 105:18 106:1,7,12,19,24 109:13,21 110:22 112:17 113:10 114:2,15,19 115:3 115:21 116:3,10,21,25 117:5,11,15,20,25 118:4 118:12 119:7,19,24 120:3 120:12,20,25 121:6,12 122:3,8,15,19,23 123:16 124:3,12,23 125:17 126:8 127:14 128:20 129:20 130:9 131:9,14,21 132:3 132:7,15 133:4,11,24 134:6,12,17,22 135:3,8 136:5,16 137:1,6,16,22 138:4,12,18 139:1,7,13 139:18 140:11,15 141:13 142:8,13 143:3,15,19 144:18,23 145:2,6,18,22 146:12,19 147:1,12,19 147:23 148:12,20 149:5 149:14,19,23 150:4,9,14 150:25 151:7,24 152:4 152:14,23 153:12,19 154:4,11,16 155:2,6,10 155:14,18,23 156:6,15 156:25 157:5,12,20,25 158:4,17,22 159:1,11,20 160:18,23 161:5,12 162:3 162:9,15,19 163:3,9,18 163:24 164:5,12,17,21 164:25 165:6 166:21 167:1,7,12 168:16,20 169:9,15,19,23 170:2,7 170:11,20 171:3,8,15,21 172:2,7,18 173:1,5,10 173:14,19,23 174:11,21 175:13,18,23 176:17,22 177:4,9,17,23,24 178:6 178:17,23 179:5,9,25 180:5,13 181:3,8,13,18 182:13,21 183:4 184:11 184:19 185:1 186:1,7,16 187:3,8,17 188:1,6,14 188:24 189:6,17,22 190:3 190:15,24 191:3,12,22 192:6,12,16,20 193:9,14 193:18 194:8,13,23 195:3 195:7,12,19 196:21,25 197:5,9,19,23 198:3,8 198:12,16 199:4,11,24 200:6,15,20 201:2,7,17 201:21 202:6,12,17 203:10 204:9,14,19 205:3 205:8,25 206:6 207:8,14 207:19,23 208:15,19,24 209:4 211:18 212:8,25 213:15,22 214:6,18,25 215:9,18 216:4,11,18 217:2,9,25 218:5,14,20</p>	<p>219:1,9,14 220:4,11,15 221:2,11,16,23 223:3,8 223:13,21 224:4,8,15,19 225:4 226:15 227:18,24 229:8,13,18,23 230:6,21 231:11,17,22 232:5,10 232:24 233:5,15,25 234:9 234:15,22 235:6,15,19 236:9 239:1 qualifications [2] 218:9 247:25 qualified [1] 191:4 qualify [2] 205:17 216:14 quality [26] 82:3,7,23 83:10 107:7 165:24 182:1 197:15 198:11,20,24 199:22 220:9 259:1,24 260:2,3,20 262:20 263:23 264:8,17,21,22 284:6 299:12 quarters [1] 327:22 questioned [1] 176:12 127:14 128:20 129:20 130:9 131:9,14,21 132:3 132:7,15 133:4,11,24 134:6,12,17,22 135:3,8 136:5,16 137:1,6,16,22 138:4,12,18 139:1,7,13 139:18 140:11,15 141:13 142:8,13 143:3,15,19 144:18,23 145:2,6,18,22 146:12,19 147:1,12,19 147:23 148:12,20 149:5 149:14,19,23 150:4,9,14 150:25 151:7,24 152:4 152:14,23 153:12,19 154:4,11,16 155:2,6,10 155:14,18,23 156:6,15 156:25 157:5,12,20,25 158:4,17,22 159:1,11,20 160:18,23 161:5,12 162:3 162:9,15,19 163:3,9,18 163:24 164:5,12,17,21 164:25 165:6 166:21 167:1,7,12 168:16,20 169:9,15,19,23 170:2,7 170:11,20 171:3,8,15,21 172:2,7,18 173:1,5,10 173:14,19,23 174:11,21 175:13,18,23 176:17,22 177:4,9,17,23,24 178:6 178:17,23 179:5,9,25 180:5,13 181:3,8,13,18 182:13,21 183:4 184:11 184:19 185:1 186:1,7,16 187:3,8,17 188:1,6,14 188:24 189:6,17,22 190:3 190:15,24 191:3,12,22 192:6,12,16,20 193:9,14 193:18 194:8,13,23 195:3 195:7,12,19 196:21,25 197:5,9,19,23 198:3,8 198:12,16 199:4,11,24 200:6,15,20 201:2,7,17 201:21 202:6,12,17 203:10 204:9,14,19 205:3 205:8,25 206:6 207:8,14 207:19,23 208:15,19,24 209:4 211:18 212:8,25 213:15,22 214:6,18,25 215:9,18 216:4,11,18 217:2,9,25 218:5,14,20</p>	<p>rash [1] 113:1 rate [25] 18:23 19:4,7 20:1,8,10 23:12,12 24:16 24:18 33:12,17 36:2,11 36:19 45:11,19,21,24 46:17 68:14 97:20 120:18 139:25 313:8 rates [5] 25:4 45:22 85:21 85:22 233:20 rather [4] 144:17 153:2 295:3 313:1 rationale [1] 161:18 raw [1] 113:1 re [6] 2:5 49:15 121:16 122:5 124:20 213:4 re-do [1] 215:4 reach [4] 158:10 179:21 220:1 277:13 reached [5] 32:18 81:22 179:24 290:4 328:22 reaching [3] 158:11 284:11 287:14 react [3] 108:5 151:14 240:24 reacting [1] 111:6 reaction [5] 63:18,19 96:12 186:8 196:15 read [25] 68:24,25 69:3 69:15 74:25 99:23 103:25 112:24 133:9 186:25 187:11 192:21 194:4 199:20 209:8 225:2,2 270:24 278:17 285:20 315:10 316:2 318:8,10 327:13 readability [2] 259:11 259:20 readable [1] 257:25 reading [11] 134:15 142:17 200:8 215:19 224:21 268:9 276:18 314:12 330:9,9,18 real [1] 200:7 realities [1] 237:9 realize [2] 91:3 94:18 realized [3] 92:10 93:18 140:21 really [31] 4:2 19:17 22:21 24:9 28:1 30:21 42:7 48:13 60:20 73:8 74:11 101:1,2 119:4 126:6,21 130:21 139:23 144:10 146:23 163:7 165:19 166:9,18 190:22 222:5 250:22 281:5 290:12 291:20 321:13 realm [2] 135:20 296:10 reason [13] 20:12,13 21:18 48:15,19,21 56:24 107:16 167:8 191:10 209:7 228:8 233:17 reasons [6] 49:20 75:10 76:24 190:20 214:15 303:2 rebuilding [1] 168:10 receive [7] 29:19 86:1</p>	<p>101:15 134:8,18 144:1 315:9 received [13] 5:9 37:13 43:13 67:16 68:1 85:19 124:20 140:18 217:16 240:13,16,17 315:1 receives [1] 86:2 receiving [2] 27:20 136:2 recent [2] 186:25 187:4 recently [1] 200:16 receptive [1] 152:1 receptor [3] 1:2 279:1 335:4 receptors [1] 279:2 RECESS [2] 115:25 240:7 rechecking [1] 79:10 reciprocal [1] 214:24 recognize [6] 164:22 167:19 180:25 181:2 245:15 281:18 recollection [4] 118:5 165:16 233:7 332:12 recommend [2] 225:9 269:4 recommendation [1] 253:13 recommendations [4] 159:7,12 253:17 298:16 recommended [7] 20:21 31:12 82:12,13 167:18 169:10 267:1 recommending [1] 226:10 record [16] 113:22 189:1 189:11,16 192:24 249:21 250:12 251:6,15 252:11 252:19 253:10 254:16,18 255:12 256:15 recording [1] 256:21 records [2] 190:7 252:1 recovery [1] 168:13 rectified [1] 330:20 red [1] 78:10 redact [1] 240:23 redacted [7] 203:1,7 204:4 240:14,15,18 241:6 redone [3] 321:15 331:17 332:22 refer [10] 43:24 125:8 163:10 214:11 245:4 254:5 262:4 276:19 315:8 317:18 reference [6] 45:10 47:3 102:6 140:2,8 276:17 referenced [5] 12:22 76:8 84:10 313:1,3 references [1] 45:16 referred [6] 50:21 203:15 209:18 240:12 247:6 266:21 referring [7] 92:7,10 241:22 312:2,4 317:21 324:13</p>
<p>-Q-</p>				
<p>Q.C [636] 1:6,7,12 2:3,4 3:4,5,9,21 4:8,19 5:2,11 5:23 7:8,13 9:10,22 10:1 10:5,15 11:7,13,19,24 12:4,14 13:10,15,22 14:9 14:13,20,24 15:4,12,17 16:2,6,12,17,21,25 17:4 17:10,14,21 22:12,16 23:3,9,16,20 24:3,24 25:9,16,20,25 26:5,13 26:17,25 28:4,8,14,23 29:8,14 30:6,11,15,22 31:2,8,13,21,25 32:4,12 33:3,7 34:8,12,17 36:16 36:23 37:21 38:2,7,17 38:24 39:3,9,13,18 40:7 40:18 41:3,9,21 42:1,6 42:14 43:4,15,23 44:3 44:12,23 45:14,23 46:3 46:8,13 47:5,10 48:6,14 48:24 49:6,10,14 50:9 50:14 51:1,9,14,18 52:4 52:8,13,17 53:1,7,19 54:1,7,17 55:7,14,20 56:1,4,11,15,19,23 57:7 57:17,22 58:5,9,15,20 58:25 59:19 60:9,13,25 61:8 62:21 63:2,12,17 64:4 65:5,14,21 66:6,22 67:4,13,21,25 68:5,12 68:18,22 69:8,13,18 70:1 70:7,11,18,24 71:3,10 71:16 72:6,23 73:2,11 73:22 74:1,20,24 75:4,8 75:21 76:22 77:9,16,23</p>	<p>78:17 79:2,25 80:4,10 80:14,23 81:3,7,11 82:8 83:6,11,17 84:8,15,21 85:3,8,13 86:9,13,19 87:1,7,17 88:4,13 89:2,6 89:10,14 90:3,7,18,23 91:4,9,13,17,21,25 92:13 92:19,25 93:4,8,13,17 94:3,8,12,23 95:2,10,24 96:4,11,15,20 97:1,10 97:23 98:3,11,19 99:1,7 99:15,22 100:10,15 101:5 101:16,23 102:5,14,21 103:20,24 104:4,10 105:18 106:1,7,12,19,24 109:13,21 110:22 112:17 113:10 114:2,15,19 115:3 115:21 116:3,10,21,25 117:5,11,15,20,25 118:4 118:12 119:7,19,24 120:3 120:12,20,25 121:6,12 122:3,8,15,19,23 123:16 124:3,12,23 125:17 126:8 127:14 128:20 129:20 130:9 131:9,14,21 132:3 132:7,15 133:4,11,24 134:6,12,17,22 135:3,8 136:5,16 137:1,6,16,22 138:4,12,18 139:1,7,13 139:18 140:11,15 141:13 142:8,13 143:3,15,19 144:18,23 145:2,6,18,22 146:12,19 147:1,12,19 147:23 148:12,20 149:5 149:14,19,23 150:4,9,14 150:25 151:7,24 152:4 152:14,23 153:12,19 154:4,11,16 155:2,6,10 155:14,18,23 156:6,15 156:25 157:5,12,20,25 158:4,17,22 159:1,11,20 160:18,23 161:5,12 162:3 162:9,15,19 163:3,9,18 163:24 164:5,12,17,21 164:25 165:6 166:21 167:1,7,12 168:16,20 169:9,15,19,23 170:2,7 170:11,20 171:3,8,15,21 172:2,7,18 173:1,5,10 173:14,19,23 174:11,21 175:13,18,23 176:17,22 177:4,9,17,23,24 178:6 178:17,23 179:5,9,25 180:5,13 181:3,8,13,18 182:13,21 183:4 184:11 184:19 185:1 186:1,7,16 187:3,8,17 188:1,6,14 188:24 189:6,17,22 190:3 190:15,24 191:3,12,22 192:6,12,16,20 193:9,14 193:18 194:8,13,23 195:3 195:7,12,19 196:21,25 197:5,9,19,23 198:3,8 198:12,16 199:4,11,24 200:6,15,20 201:2,7,17 201:21 202:6,12,17 203:10 204:9,14,19 205:3 205:8,25 206:6 207:8,14 207:19,23 208:15,19,24 209:4 211:18 212:8,25 213:15,22 214:6,18,25 215:9,18 216:4,11,18 217:2,9,25 218:5,14,20</p>	<p>219:1,9,14 220:4,11,15 221:2,11,16,23 223:3,8 223:13,21 224:4,8,15,19 225:4 226:15 227:18,24 229:8,13,18,23 230:6,21 231:11,17,22 232:5,10 232:24 233:5,15,25 234:9 234:15,22 235:6,15,19 236:9 239:1 qualifications [2] 218:9 247:25 qualified [1] 191:4 qualify [2] 205:17 216:14 quality [26] 82:3,7,23 83:10 107:7 165:24 182:1 197:15 198:11,20,24 199:22 220:9 259:1,24 260:2,3,20 262:20 263:23 264:8,17,21,22 284:6 299:12 quarters [1] 327:22 questioned [1] 176:12 127:14 128:20 129:20 130:9 131:9,14,21 132:3 132:7,15 133:4,11,24 134:6,12,17,22 135:3,8 136:5,16 137:1,6,16,22 138:4,12,18 139:1,7,13 139:18 140:11,15 141:13 142:8,13 143:3,15,19 144:18,23 145:2,6,18,22 146:12,19 147:1,12,19 147:23 148:12,20 149:5 149:14,19,23 150:4,9,14 150:25 151:7,24 152:4 152:14,23 153:12,19 154:4,11,16 155:2,6,10 155:14,18,23 156:6,15 156:25 157:5,12,20,25 158:4,17,22 159:1,11,20 160:18,23 161:5,12 162:3 162:9,15,19 163:3,9,18 163:24 164:5,12,17,21 164:25 165:6 166:21 167:1,7,12 168:16,20 169:9,15,19,23 170:2,7 170:11,20 171:3,8,15,21 172:2,7,18 173:1,5,10 173:14,19,23 174:11,21 175:13,18,23 176:17,22 177:4,9,17,23,24 178:6 178:17,23 179:5,9,25 180:5,13 181:3,8,13,18 182:13,21 183:4 184:11 184:19 185:1 186:1,7,16 187:3,8,17 188:1,6,14 188:24 189:6,17,22 190:3 190:15,24 191:3,12,22 192:6,12,16,20 193:9,14 193:18 194:8,13,23 195:3 195:7,12,19 196:21,25 197:5,9,19,23 198:3,8 198:12,16 199:4,11,24 200:6,15,20 201:2,7,17 201:21 202:6,12,17 203:10 204:9,14,19 205:3 205:8,25 206:6 207:8,14 207:19,23 208:15,19,24 209:4 211:18 212:8,25 213:15,22 214:6,18,25 215:9,18 216:4,11,18 217:2,9,25 218:5,14,20</p>	<p>quiet [2] 36:5 107:16 Quinn [9] 89:20,23 94:13 95:7 96:6 116:6,11 327:18 328:17 Quinn's [1] 86:4 quite [10] 87:14 112:9 183:1 192:24 209:6 223:4 274:17 275:14 291:5 293:12 quote [4] 6:8 7:15 312:16 318:15 quoted [2] 5:19,24</p>	<p>rash [1] 113:1 rate [25] 18:23 19:4,7 20:1,8,10 23:12,12 24:16 24:18 33:12,17 36:2,11 36:19 45:11,19,21,24 46:17 68:14 97:20 120:18 139:25 313:8 rates [5] 25:4 45:22 85:21 85:22 233:20 rather [4] 144:17 153:2 295:3 313:1 rationale [1] 161:18 raw [1] 113:1 re [6] 2:5 49:15 121:16 122:5 124:20 213:4 re-do [1] 215:4 reach [4] 158:10 179:21 220:1 277:13 reached [5] 32:18 81:22 179:24 290:4 328:22 reaching [3] 158:11 284:11 287:14 react [3] 108:5 151:14 240:24 reacting [1] 111:6 reaction [5] 63:18,19 96:12 186:8 196:15 read [25] 68:24,25 69:3 69:15 74:25 99:23 103:25 112:24 133:9 186:25 187:11 192:21 194:4 199:20 209:8 225:2,2 270:24 278:17 285:20 315:10 316:2 318:8,10 327:13 readability [2] 259:11 259:20 readable [1] 257:25 reading [11] 134:15 142:17 200:8 215:19 224:21 268:9 276:18 314:12 330:9,9,18 real [1] 200:7 realities [1] 237:9 realize [</p>

Inquiry on Hormone Receptor Testing

<p>refers [1] 122:5 refine [1] 130:24 reflected [2] 60:5 97:14 reflections [2] 206:20 206:21 reflective [1] 111:17 refused [1] 93:10 refusing [2] 101:3 108:18 regard [6] 14:12 116:15 122:14 134:5 191:8,9 regarding [5] 8:16 240:13 249:3 251:17 310:24 regardless [1] 151:17 regional [3] 1:10,16 170:21 Registrar [5] 191:13 202:18 235:9,21 236:11 regular [1] 287:6 reiterates [1] 189:7 relate [4] 241:20 302:2 331:16 332:20 related [4] 176:3 203:19 246:11 289:18 relates [2] 149:10 281:22 relating [2] 183:17 331:11 relation [7] 38:10 86:10 156:8 214:20 269:15 286:11 296:19 relation's [1] 148:4 relations [6] 168:7 259:3 260:5 277:6 279:18 306:16 relationships [1] 72:16 relative's [1] 49:25 relatively [1] 220:19 relay [1] 275:4 relayed [2] 273:25 301:19 release [18] 30:4,7,25 31:4,6 32:8,13,17,24 33:6,14 41:17 43:3 52:25 63:10 67:19 156:12 330:16 released [6] 31:9,15,17 31:19 154:23 290:11 releases [1] 287:6 relevant [1] 279:25 reliability [1] 167:3 relied [1] 249:2 reluctance [2] 48:7,8 reluctant [1] 48:11 rely [1] 249:7 relying [1] 320:12 remark [1] 202:24 remember [40] 4:23 17:20 20:2,14 42:24 47:19 62:5 65:11 66:19 81:10 82:2 87:4 92:5 98:15 118:24 129:1,14 129:24 134:15 136:2 144:11 147:6,9 149:2,13</p>	<p>150:8 153:10 160:21 164:24 169:13 172:13 175:19 179:6 217:14 225:25 242:19 308:9 313:11 327:12,14 Remembering [1] 208:11 remembrance [1] 233:9 removed [1] 62:11 repeat [1] 219:2 repeated [2] 304:8 323:19 repeatedly [3] 37:17 65:11 264:3 report [18] 13:2 22:8 35:9 61:21 62:4,10,12 63:8,11,23 75:1 89:17 103:4 188:9,10 257:17 309:15,17 reported [7] 22:10 26:14 62:7,18 99:12 172:15 313:7 reporter [2] 165:17 312:16 reporters [7] 21:15 34:3 35:6 89:19 140:23 161:25 329:16 reporting [9] 27:7,13 61:17 65:15 143:7 293:8 293:12 307:2 328:21 reports [10] 73:18 74:4 74:7 302:2 305:6 308:15 309:8 314:4 328:18 329:9 representative [3] 219:25 304:1 311:17 represented [1] 140:25 reputation [20] 209:11 209:16,20,22 211:6,8,21 211:23 226:24 227:7,8 227:25 228:4,14,14,24 228:25 229:2,7 230:4 request [17] 61:12 85:23 85:24 86:4 87:6,12 89:24 90:1,8 94:21 118:20 120:8 126:14 159:23 200:1,5 231:5 requested [3] 19:1 169:10 315:10 requesting [2] 85:20 118:25 requests [4] 100:9,16 123:9 314:19 require [1] 159:15 required [1] 128:2 research [3] 242:21,22 289:10 resentment [1] 237:4 reservations [2] 286:19 314:13 resided [2] 73:17,19 resisted [1] 30:16 resource [2] 306:13 314:23 resources [2] 305:23 306:13 respect [12] 22:17 24:25</p>	<p>37:22 73:12 111:11,12 112:18 113:11 152:24 227:3 237:20 240:11 respectful [2] 62:10 141:4 respecting [1] 108:19 respects [1] 267:22 respond [5] 9:19 23:24 103:8 151:14 315:15 responded [4] 8:3 130:16 146:5 159:5 responding [7] 86:21 89:25 90:4,13 139:22 187:22 314:19 responds [1] 8:12 response [13] 22:24 80:5 151:22 156:22 165:8 215:25 231:3,7,20 236:20 236:25 238:1 264:22 responses [2] 230:18 231:9 responsibility [13] 183:23 185:20 195:23 196:3,5,6 238:7 256:15 262:18 271:14,22 293:20 306:18 responsible [18] 82:15 108:6 148:22 185:3,23 186:8,11 236:24 257:11 257:15,19 266:7 271:19 272:9,23 299:10 314:17 314:21 responsive [3] 151:19 193:24 293:21 rest [3] 185:21 209:14 299:3 result [10] 27:3,9 29:20 46:20 49:18 61:6 82:5 192:22 210:18 240:21 results [37] 18:14 26:14 28:19 46:23 81:14,17 82:11 105:22 106:9,11 157:16 163:15 225:18 276:23,25 278:21 279:1 279:12 295:21 297:23 298:8,15 310:2 318:18 318:21 319:10,16 320:15 321:1,22 322:3,6,8 324:23 325:6 326:19 328:6 resume [1] 21:10 RESUMES [1] 2:2 retain [1] 126:10 retest [8] 49:20,21,23 225:15 276:24 278:25 322:9,23 retested [20] 25:21 26:9 26:10 28:21 31:22 37:15 49:25 50:6 125:2 230:24 268:6,13 277:3 279:5 322:3 325:6 327:23 328:6 328:24 329:25 retesting [15] 29:20 79:14 138:14 208:12 225:12 268:18 274:11 276:21 278:19 295:5 318:13 322:5,8 323:4 326:16</p>	<p>retests [2] 331:4,5 reticence [1] 88:23 retract [1] 15:19 retraction [1] 172:17 retractions [1] 315:6 retrospect [2] 24:20 29:22 return [1] 241:5 returned [1] 319:5 revealed [4] 66:5 77:14 77:17,18 reveals [1] 241:2 reversal [1] 81:14 review [18] 18:15 33:24 35:16 46:20 56:20 73:18 74:4,7 79:5 165:17 176:10,16,18 184:14 216:22 310:3,13 316:19 reviewed [1] 40:21 reviews [6] 21:4 77:18 154:8 310:25 312:4 314:3 revise [1] 251:3 revised [10] 45:2 205:2 208:6 245:11 264:1 281:4 281:8 325:20,21 326:5 revises [1] 275:17 revisions [1] 45:5 rewrite [1] 250:9 rewritten [1] 250:23 Rick [1] 193:2 right [70] 1:8 10:25 28:15 28:15 41:2,25 46:2,7 48:23 50:25 68:17,21 82:2 86:12 90:10 95:6 110:6 117:10,24 121:5 126:13 143:1 160:15 162:18 170:6,10,14 177:12 180:4 182:10,20 183:11 184:25 186:12 188:21 192:17 193:13,15 193:21 197:4,25 202:5 204:8,18 220:22 223:15 225:22 231:14 233:20 234:2 240:5 248:17 251:13 252:5 256:3 267:19 270:14 275:7 291:7 294:22 308:17 309:23 319:4,7 320:10 321:9 324:16 325:9 327:3 334:12 rightly [1] 29:18 risk [4] 182:2 186:20 211:23 223:24 risking [2] 228:3,3 Rogers [2] 107:13 112:8 role [4] 105:14 252:10 271:6 308:14 Rolf [1] 1:8 roller [1] 301:6 roof [1] 247:17 room [4] 53:3 176:8 251:21 291:15 rough [2] 129:9 334:8 routinely [2] 84:12,14 Rowe [1] 171:24</p>	<p>ruled [1] 27:17 ruling [1] 86:15 run [3] 160:25 263:24 305:4 running [2] 161:19 175:7</p> <hr/> <p style="text-align: center;">-S-</p> <hr/> <p>sad [1] 238:22 salvo [2] 110:17 113:2 sample [2] 276:24 278:22 samples [9] 26:10 49:25 50:6 230:24 276:21 278:19 295:19 324:22 327:23 sampling [1] 219:25 Sandra [1] 1:7 sat [5] 16:7 19:8 76:9 265:8 291:15 satisfied [1] 52:10 Saturday [1] 44:15 saw [6] 93:5 97:6,14 109:24 156:1 231:12 says [36] 6:5 36:9 38:12 58:2 66:13 85:17 102:25 130:14 131:1 138:5 146:6 152:7 154:21 157:6 165:9 174:23,24 178:19 179:18 186:18 188:16,25 189:8 189:18 213:23,25 220:5 224:5 230:24 232:11 235:25 236:19 237:14 309:25 312:6 327:24 scale [1] 253:16 schedule [3] 21:20 61:14 171:22 scheduled [3] 61:12,14 174:7 scheduling [1] 11:15 school [1] 107:18 Sciences [3] 34:23 247:17 278:20 scope [2] 75:20 190:22 scratched [1] 59:3 screen [5] 37:23 41:15 203:2 277:21 300:22 screened [2] 142:19,22 screening [8] 141:8 143:1 163:2 172:15 304:11,12,13,18 script [1] 40:16 scroll [1] 309:21 scrolling [1] 186:17 se [1] 183:24 search [1] 172:19 seated [3] 3:2 116:2 240:9 second [18] 23:10 34:3 81:6 89:20 104:18,18 120:22 127:22 207:1,3 208:16 217:10 237:19 276:16 279:10 306:11 318:4 319:25 second-last [2] 114:7 163:13</p>
--	--	---	--	--

<p>Secondly [1] 35:13 Secretariat [1] 142:4 secretary [1] 255:14 section [3] 180:20 187:19 210:8 see [56] 9:4 33:16,19 34:22 41:15 43:13 90:11 92:23 99:24 110:4 116:19 125:20 129:24,25 133:17 135:4,5 140:19 142:16 142:21 150:10 163:15 166:3 178:14,24 180:14 180:17 181:9 182:8 188:21 189:2 191:24,25 192:7,8,23 193:21 194:14 199:17 202:23,24 216:7 225:8 236:16 238:16 242:19 244:20 254:15 270:23 276:16 293:8 302:17 307:23 319:14 324:3 329:15 seeing [6] 107:22 191:14 261:18 282:22,23 304:7 seek [2] 174:9 252:12 seeking [3] 156:22 159:24 175:15 seem [4] 181:20 189:23 193:20 269:7 selected [1] 127:9 send [14] 56:12 104:12 121:7 154:7 172:12 199:9 200:2 202:4 216:5 274:9 275:19,22 295:18 314:24 sending [11] 40:20 56:7 121:1 132:12 133:25 134:2 150:19,19,20 165:7 225:23 sends [1] 104:16 senior [4] 5:14 6:25 10:11 53:3 sense [20] 11:4 14:4 18:6 35:20 40:17 44:6 55:8 59:8 61:16 65:16 98:21 113:24 119:9 123:25 125:15 153:25 249:8 283:19 285:13 302:24 senses [1] 183:25 sensible [1] 108:6 sensitive [1] 152:10 sent [24] 40:23 52:14 60:5 60:14 69:15 92:17 99:2 99:9 101:9 119:13,16 121:2,8,19 133:1,3 141:20 178:13 199:3 203:13 265:20 332:11,14 332:16 sentence [1] 47:4 September [3] 174:14 181:20 311:9 sequence [1] 120:6 series [11] 6:9 7:16,20 12:11 21:6 102:22 130:10 131:4 149:7 165:1 286:2 serve [1] 209:9 service [2] 79:16 144:9 services [5] 132:10 180:23 181:9 211:14,15</p>	<p>session [2] 35:1 193:7 set [8] 8:4,14 13:23 128:13 130:5 213:4 226:3 287:5 setting [5] 158:20 159:18 169:3 225:24 284:8 settings [1] 72:19 settled [1] 21:24 seven [7] 21:19 124:24 124:24 318:20 320:13,14 326:19 several [9] 58:2 101:7 119:10 126:25 140:24 179:18 180:4 217:17 307:22 shape [1] 289:3 share [5] 132:24,24 133:22 250:24 300:24 shared [7] 33:18 159:3 253:23 254:4,9,10 306:17 sharing [2] 35:21 132:14 shelf [1] 245:8 short [5] 78:21,24 160:11 227:17 240:1 show [8] 237:20,20 318:20 321:1,21 322:2 326:19 327:8 showed [2] 34:9 325:24 showing [1] 324:14 shown [2] 219:20,20 shows [2] 269:11 293:17 sic [1] 239:22 side [6] 73:9 111:8,9 196:6 220:18 238:13 sides [1] 136:12 sidetracked [1] 171:19 sign [1] 200:2 signature [4] 180:24,25 181:14 182:25 signed [5] 103:13 144:6 152:11 179:1 181:4 significant [3] 45:9 281:5 316:12 similar [2] 221:6,6 similarity [1] 199:2 Simmons [8] 1:10 81:1 81:5 203:4,5,22 204:4,5 Simms [1] 171:23 simple [3] 11:8 26:2 74:16 simply [7] 11:9,9 26:8 71:24 215:20 306:5 331:18 Sinai [1] 324:20 single [1] 213:5 Singleton [3] 193:2 194:24,24 sit [2] 130:3 304:23 sitting [4] 42:11,24 149:2 288:20 situation [5] 64:24 152:11 208:21 237:1 265:24</p>	<p>six [9] 21:19 188:15 213:18 220:20 245:22 295:20,20 297:23 298:14 sketch [1] 129:9 skill [1] 312:10 skilled [1] 331:9 skills [1] 261:9 slept [1] 110:5 slide [1] 57:11 slides [4] 45:7 146:25 147:2,5 smack [1] 113:2 small [8] 146:1 149:1 168:8 220:19,25 244:4 270:2 303:17 sneaky [1] 237:3 Society [4] 1:14 108:22 241:15 304:14 software [3] 240:18,19 240:24 sole [1] 256:14 solely [1] 301:11 someone [15] 8:10 9:11 14:1 182:1 202:7 203:14 256:14 264:17 279:21 304:2 307:12 314:12 325:5 328:5 331:9 sometime [3] 91:20 118:5 249:15 sometimes [11] 72:1,19 220:14 237:17 272:19 273:3 302:15,22,23 303:8 303:21 somewhat [2] 43:3 301:4 somewhere [2] 190:19 320:7 soon [3] 171:9 188:17 245:15 sorry [22] 33:4 36:3 52:5 57:9 62:22 66:10 67:22 67:24 81:10 92:1 150:17 163:7 176:1 189:1 228:3 235:23 238:15 243:23 249:1 259:14 298:14 299:23 sort [35] 14:4 20:5,7 30:19 61:4,16,20 75:15 81:21 84:2 118:25 123:11 123:14 126:21 127:22,22 129:12 142:21 152:18 185:24 210:12 215:5 221:18 222:2,17 223:1 223:16 243:8 244:5 248:24 258:17 262:17 280:17 293:18 297:9 sorted [1] 290:3 sorts [2] 18:16 243:4 sought [3] 263:16 264:6 268:8 sound [2] 28:15 335:10 sounds [3] 103:6 104:5 328:4 source [1] 58:16 sources [1] 40:3 speak [28] 11:3 24:15</p>	<p>40:16 71:11 72:3,18 88:11,21,23,23 94:21 99:10,13 101:3 107:5,8 107:12 112:9,14,21 114:8 130:3 139:8 261:9 300:4 300:5,5 312:14 speaking [32] 9:14 18:18 45:6 53:13 59:23,23 60:14,15,17 82:3 88:20 95:9,18,20 109:12 119:2 128:8 129:9,11,16,18 135:12,25 138:1 140:9 141:5 209:10 210:5 260:25 305:4 306:7 309:6 special [1] 258:6 specialist [2] 229:19 262:1 specialists [2] 79:8,11 specialty [1] 260:24 specific [7] 3:25 159:6 184:17 191:10 248:7 249:11 251:9 specifically [9] 9:13 27:17 44:5 98:1 99:18 133:3 164:10 248:11 260:25 specified [1] 48:16 specimens [2] 268:6,12 speculated [2] 250:5,8 speculating [2] 319:21 320:18 spell [2] 47:15 48:9 spelled [1] 75:16 spelling [1] 46:25 spent [3] 53:14 100:8 204:21 spoke [4] 81:16 113:17 116:12 125:14 spoken [9] 3:12 78:18 78:20 96:7 97:13 105:15 151:10 157:21 158:6 spokespeople [5] 107:11 112:3 300:5 302:25 305:5 spokesperson [4] 111:21,24 304:1 306:25 spot [2] 106:22 276:17 spring [2] 183:10 222:16 St [6] 81:17 127:8 171:11 182:9 335:7,11 stab [1] 275:15 staff [8] 3:23 5:14 113:19 187:21 197:15 198:11 199:22 254:1 stage [5] 222:4,4 223:9 298:24 299:19 stain [1] 75:15 stakeholder [10] 140:24 214:7,12,19 220:1 222:20 242:25 243:1,5 282:13 stakeholders [10] 72:17 168:12,22 169:2,3,4,6 214:3 242:23 283:2 stand [6] 2:2 60:1 107:14 136:13 148:25 151:17 standards [3] 259:11,16</p>	<p>259:18 standing [1] 329:18 start [7] 81:15 89:7 126:17 129:6 147:15 228:16 302:16 started [7] 128:25 129:10 170:19 233:10 234:18 239:25 292:13 starting [3] 127:12 236:16 276:16 starts [1] 328:9 state [1] 331:18 statement [12] 49:16 137:25 138:7 180:1 209:5 214:8 215:1 223:14,23 227:5 288:11 310:8 statements [2] 78:24 309:9 states [1] 242:20 statistical [1] 234:17 statistics [1] 138:7 status [1] 78:10 stay [1] 131:19 staying [1] 102:8 Stephanie [2] 78:20 79:21 Stephen [1] 166:8 steps [2] 255:9 304:19 still [24] 6:2 12:7 43:18 58:10 70:8,15,20 72:15 76:3 105:2 130:17 152:19 161:15 185:21 201:15 208:11 209:10 249:10 257:22 297:1 317:5 326:20 332:11,15 stipulate [1] 227:14 Stokes [3] 62:22,25 63:1 stop [1] 141:10 stories [30] 87:16 88:3,6 88:9 108:3,3 125:25 139:23 162:1 164:15 282:10 302:7,8 303:5,6 303:14,17 304:7,24 305:11,14 313:4,20 314:24 315:1,4 323:17 324:2,6 329:15 story [38] 7:7,9 79:22 81:12 83:25 84:5,10 87:13 96:3,23 97:4,5,6 98:9 99:14,23,24 100:4 100:5,7 101:8 103:1 107:8 108:5 141:16 150:7 165:7 174:15,18 175:6 244:11,13 304:17 308:11 308:12 317:12 324:4 333:15 straight [2] 237:18 289:1 straightforward [2] 331:13 333:14 strain [1] 306:15 Strange [1] 165:3 strategic [23] 137:12 241:16,21 242:10,16,18 242:23 243:15,18 244:21 245:4,14,25 246:8,10,18 246:20,25 248:6,15,18</p>
--	---	--	--	---

<p>249:11 294:16 strategize [2] 159:24 166:10 strategy [19] 126:16,19 160:10 168:13 205:19 206:9,16 207:11 221:4 222:24 223:1 243:8,9 244:2,3,8,17 247:4 248:21 stress [1] 113:25 stressed [1] 128:12 strike [1] 72:13 striking [1] 73:10 strong [1] 233:17 structure [1] 251:4 stuck [1] 50:18 students [1] 187:20 stuff [3] 48:5 129:25,25 style [1] 257:12 subject [18] 17:15 23:5 23:10 24:4 33:12 36:2 53:10 78:8 101:17 107:3 131:25 143:6,22 145:10 178:12 193:22 194:2 273:8 submission [1] 85:19 subsequent [3] 168:9 211:9 308:24 substantive [2] 24:10 303:19 substituted [1] 46:4 subtract [2] 19:22 28:2 successful [1] 292:19 such [19] 9:7 21:12 23:24 67:7 76:10 161:19 167:8 173:2 223:24 240:20 241:2 243:10 250:20 252:18 254:21 263:8 274:18 312:10 331:2 sufficient [1] 306:21 suggest [5] 108:4 109:14 187:12 322:1 334:6 suggested [4] 95:6 168:4 211:4 320:2 suggesting [7] 12:9 46:14 82:13 153:11,14 232:14 268:7 suggestions [3] 35:18 43:7 232:20 suit [2] 20:23 237:24 summarizes [1] 102:10 summary [1] 318:17 summer [5] 183:10,10 276:22 278:20 295:3 Sunday [4] 33:23 43:11 44:20 51:11 supervisors [1] 14:12 supper [1] 103:3 support [2] 187:21 215:13 supported [1] 118:20 supportive [1] 266:25 suppose [10] 11:12 12:15 43:5 86:5 141:12 176:20</p>	<p>194:16 203:23 209:17 225:1 supposed [1] 95:14 supposing [1] 202:16 surgeon [2] 82:18 279:13 surgery [1] 185:14 surgical [2] 156:20 185:15 surprised [4] 63:25 79:3 140:19 244:20 Surprisingly [1] 20:6 surround [1] 190:6 surrounded [1] 160:1 survivors [2] 6:6 115:18 Susan [17] 2:2 3:3 8:13 36:3 85:17,23 86:1 95:3 130:14 143:7,23 145:10 146:1 152:7 160:2 177:23 241:8 suspect [1] 124:8 suspected [1] 97:18 Swain [1] 171:24 swayed [2] 232:12,15 swirl [1] 202:14 system [9] 6:11 7:18 55:24,25 108:20 165:24 166:1 168:2 283:16 systemic [1] 55:17 systems [1] 208:13</p> <hr/> <p style="text-align: center;">-T-</p> <hr/> <p>Tab [1] 178:9 table [7] 2:1 20:4 229:5 265:8 271:17 272:8 273:1 tactics [2] 167:18 168:4 takes [1] 275:17 taking [5] 6:1 46:15,22 81:15 197:10 talks [2] 170:3 321:21 Tamoxifen [8] 5:9 18:13 27:23 46:25 48:1,4 50:3 81:15 Tansy [21] 5:13 8:3 17:17 60:6 66:8,12,17 84:5 85:14 87:2,5 119:13 121:1 130:12,18 143:9 143:21 144:6,12 149:9 162:23 target [2] 167:17 221:7 targeted [1] 219:25 task [1] 265:1 tea [1] 36:5 team [13] 101:11,12 154:20 165:10 185:15 190:13 231:25 232:1 235:12 259:5 264:4 271:17 284:24 teams [2] 185:8 272:8 technical [12] 18:9,10 22:5 33:13,14 41:16,17 75:19 282:16 301:13,19 315:11 technologists [2] 55:23</p>	<p>312:11 technology [2] 54:25 213:6 Telegram [9] 34:4 38:12 62:6 63:3 161:17 170:8 308:9 313:3 317:17 Telethon [2] 174:1,7 telling [9] 32:7 37:2 94:13 115:6 159:22 211:24 212:11 228:1 299:2 ten [16] 37:16,18 38:3,3 38:10,16,18 39:6 49:17 220:25 309:22,23 312:25 312:25 313:8 319:3 tens [1] 210:2 term [5] 233:21 247:1 250:11 282:16 301:7 terminology [1] 283:20 terms [34] 19:4 35:11 42:20 43:18 59:20 62:23 67:19 98:20 106:8 111:20 111:24 114:21 128:7 131:15 134:23 142:3 183:20 195:24 196:12,17 227:7 252:9 253:13 258:10,12 261:9 262:11 289:4 290:5 297:17 299:1 301:10,18 306:12 terrible [2] 115:15,20 terribly [1] 100:21 terrific [1] 289:9 test [27] 18:11,12 35:7 64:9,11 75:10 76:25 81:17 82:5,11 97:20 163:14 210:14,18 213:5 225:18 242:19 279:12 292:14,21 295:18,21 298:8 310:2 319:16 327:21,22 tested [5] 19:16 31:18 231:2 277:13 288:3 testified [3] 215:24 216:12 235:7 testify [1] 238:17 testimony [5] 236:11,13 236:14 238:2 239:12 testing [24] 1:2,13 4:5 21:10 27:9 37:13 38:14 54:21 81:13 101:17 146:15 185:2 233:18 279:25 293:4 310:3,14 312:6,9,12 316:19 324:21 332:22 335:4 tests [33] 25:21 26:9 126:1 167:4 210:2,11,12 210:12,13,15,17,22,24 215:4 227:13 288:4 318:12,19 319:3,5,6,9 319:22 320:13 321:14 322:2 326:14,18 328:23 329:1,25 331:17 332:23 text [3] 40:9,10 276:17 thank [27] 3:6 81:4,8 106:25 115:22 116:4 146:7 176:1 177:13,25 189:7 192:8 204:18 217:22 228:21 236:10</p>	<p>239:3,6,8,10,11,14,22 240:9 241:7,10 261:15 thanks [10] 8:13 66:16 81:24 96:14 102:25 130:16 143:9 144:3,5 146:5 themselves [7] 77:20 107:23 108:1 185:4 215:6 289:8,10 therapies [1] 288:23 therapy [1] 288:6 there'd [2] 22:24 243:19 thereabouts [1] 28:24 therefore [3] 105:16 112:5 166:2 they've [1] 268:22 thinking [10] 38:14 83:4 94:1 104:19 137:17 146:10 177:25 252:13 254:18 281:11 thinks [1] 203:14 third [4] 57:23,24 142:23 178:18 Thomas [2] 230:15 307:18 Thomas-Pennell [1] 276:6 Thompson [1] 141:25 thorough [1] 153:7 thought [30] 24:14 26:8 29:10,11 33:19 37:2 55:17 61:25 64:2 74:2,6 112:20 114:9 118:21 131:19 141:3,11 153:1 200:10 207:5 250:25 251:2 266:7 272:8 289:17 298:25 299:18 308:18 318:1 322:17 thousands [3] 112:24 112:25 142:19 three [12] 34:3,5,14 106:25 112:7 171:23 213:17 238:23 248:16,22 288:19 327:21 three-week [1] 172:21 through [49] 15:20 20:25 27:10 37:8 42:15 49:3 66:5 102:9 109:6 110:6 112:20 123:12 130:4 137:14 140:6 142:17 151:2 156:23 183:6,12 187:11 197:10 201:8 221:18 225:13 228:17 245:10 273:24 275:22 278:17 280:8,8,11,14 281:18 282:1,10,22,22 289:7 298:3,17,18,20 299:9,11 325:18 326:14 330:16 throughout [11] 10:11 127:12 144:2 222:12,15 244:24 260:11 262:25 277:21 284:25 331:23 throw [3] 8:10 9:11 13:25 throwing [1] 271:16 thrown [2] 19:10 273:1</p>	<p>Thursday [9] 7:10 85:16 116:19 117:7 118:9 127:24 128:3,18,24 tidied [1] 206:2 Tilley [73] 3:13 7:1 15:23 15:25 44:19 52:2 78:2,8 80:6 88:17 89:3 94:19 94:24 101:9 102:25,25 104:11 107:2 113:12 116:13,19 119:5 121:18 124:17 128:24 129:12 135:17 138:1 139:2,8 140:8,25 149:7,22 150:18 151:2,12,25 152:6 153:3 153:3,9,17 154:6,17 156:11 157:6 159:14,22 161:8 166:8 170:16 174:6 206:13 207:7,24 208:7 208:20 212:15 216:21 217:3,16,22 219:4 224:21 249:19 250:8,14 251:16 276:6 288:10 300:25 306:4 Tilley's [2] 135:25 236:7 timeframe [2] 300:14 300:15 timeline [1] 243:9 timely [2] 61:18 186:19 times [10] 18:2 72:20 88:21,22 87:7 197:6 263:23 269:23,24 301:25 timing [3] 10:25 12:19 212:20 tired [3] 110:5 128:12 266:13 tissue [4] 276:21 278:19 278:22 324:21 title [5] 180:20 193:3,10 235:23 260:15 today [21] 43:14 62:7,10 63:11 85:24 103:1 124:20 130:16 143:25 144:4 145:14 160:3 225:22 241:18 257:23 263:23 293:8 294:21 295:10 296:1 334:16 together [20] 19:8 25:1 32:10,19 40:1 53:15 110:1 136:13 146:25 147:2 156:10 205:10 219:24 220:2 254:12 257:22 271:12,15 282:2 293:24 tomorrow [10] 33:22 44:19 45:4 86:2 121:24 145:10 160:7 170:23 171:10 225:22 tomorrow's [2] 145:12 146:4 tone [2] 63:25 280:24 too [12] 39:25 60:15 148:7 151:16 161:10 164:16 171:20 214:24 289:20 301:7 304:14 334:14 took [9] 129:10,10,15,17 202:8 211:9 239:24 273:10 275:19 tool [2] 200:11 280:11</p>
---	--	---	--	--

Inquiry on Hormone Receptor Testing

<p>top [4] 27:14 128:7 230:16 237:10 topic [4] 76:16 93:1 142:7 143:24 total [15] 19:15 25:21 26:9,10 31:18 32:1 38:13 38:14 50:24 51:6 62:17 70:19 332:8,10,13 totality [2] 300:3 301:1 touches [1] 115:19 tour [2] 22:5 34:25 toward [1] 236:17 tracked [1] 81:20 tracking [1] 168:11 tracks [1] 302:1 traditional [1] 72:17 tragic [1] 294:16 training [3] 258:6 259:7 261:10 Transcon [1] 161:17 transcribed [1] 335:9 transcript [5] 10:7,9 327:10,17 335:3 transcripts [7] 143:22 143:24 144:1,11,15 145:3 307:6 transpired [1] 158:16 treated [1] 270:16 treating [1] 270:15 treatment [28] 20:21 27:8 29:19 31:12 46:19 47:22 48:17,21 50:4 82:13,14 115:11 210:21 277:1 278:23 279:12 288:9,13,15,23 290:24 291:12 292:10,15 298:4 299:1,8,11</p>	<p>151:18 158:10 169:13 172:13 212:14 270:13 274:8 283:14 289:15 293:24 297:5 298:23 303:15 317:5 320:6 Tuesday [4] 96:2,5 100:11 144:3 turn [6] 180:14 230:10 266:20 313:15 327:25 332:19 turned [1] 100:7 turning [2] 100:8,16 turns [1] 41:12 Turpin [1] 141:23 TV [2] 170:22 276:17 Twenty [1] 334:10 two [34] 21:14 22:21 23:10 34:1 78:1 81:15 89:19 100:8 107:13,18 108:8 110:8 118:16,16 118:22 121:15 123:5 145:8 148:5 160:24 177:13 188:8 192:7 209:1 213:2,17 230:12,16 235:20 247:10 263:1 311:2 317:4 326:5 two-day [1] 111:7 type [9] 5:24 8:10 12:6 243:9 247:9 257:18 282:22 287:2,14 typed [1] 181:19 types [10] 167:4 210:10 210:22,22 242:15 247:24 253:9 261:7 285:1 291:9 typical [1] 59:2 typically [1] 243:14 typo [1] 146:1</p>	<p>326:20 undated [2] 169:24 170:1 under [11] 75:10 85:19 106:5 113:25 114:7 187:14 188:15 205:11 235:23 252:25 253:17 underneath [2] 40:9 181:9 understand [30] 35:7 65:15 97:12 103:17,21 117:22 137:12 153:3 154:6 163:7 168:21 201:8 205:4 207:9 233:22 241:4 251:2 263:1 282:19 288:7 288:13,20 289:13,18,21 290:23 293:6,7 294:1 302:7 understandable [1] 224:20 understands [1] 272:1 understood [13] 22:20 54:8 77:17 93:21 139:2 139:8 144:19 151:12 203:6 208:8 263:5 293:3 323:8 undertaken [1] 165:18 undertaking [1] 3:19 undesired [1] 187:10 unexpected [1] 187:10 unfair [3] 62:2 64:2 111:9 unfairly [1] 108:16 unfold [1] 100:3 unfolding [2] 99:25 119:10 unforgivable [1] 237:12 unfortunate [2] 9:1 238:21 unfortunately [1] 304:25 unhappiness [2] 70:14 70:25 uninhibited [1] 107:20 uninvolved [1] 184:7 unique [1] 287:5 unless [5] 78:14 83:15 102:1 159:6 239:25 Unlike [1] 229:1 unprecedented [1] 35:2 unprofessional [1] 237:3 unreasonable [1] 183:6 unsure [1] 51:25 unusual [2] 84:4 132:23 unwillingness [1] 72:4 up [74] 3:16 6:1,13,22 8:4 8:15 12:7 17:16,19 19:13 20:8 22:11,18 28:25 34:9 37:22 39:4 41:15 62:9 63:22 64:19 65:12 69:21 71:4 79:22 83:3,4,10 84:23 86:14 88:3 94:4 104:11 107:14 108:12 111:1,14 123:9 133:17</p>	<p>139:24 140:20 141:8 145:11 148:9 153:4 156:3 159:23,25 161:13 163:2 163:12 169:3 184:18 206:2 210:9 213:4,25 225:18,24 227:1 244:10 255:16 263:22 286:9,10 300:22 303:2 317:4 320:1 324:11,22 329:11 330:19 332:15 upcoming [1] 87:15 update [2] 66:15 124:19 uppermost [2] 54:9 271:3 upstairs [1] 94:19 urged [1] 116:13 urgency [1] 226:6 usage [2] 55:25 56:2 used [33] 23:21 25:13 38:3,10,18,20,21,22 39:6 42:20 75:14 210:19 219:18 220:8,9,10,12 243:17 244:23 247:2 249:2 253:23 257:23 282:16 283:16,20 284:21 292:15 301:6 312:10 317:16 331:10 uses [1] 249:20 using [6] 38:3 240:19,24 273:1 322:18,21 usually [8] 21:15,18 37:6 219:18,24 220:24 243:10 244:3</p>	<p>329:24 views [2] 10:16 263:2 vis-a-vis [2] 200:11 216:23 visit [1] 34:21 VOCM [3] 34:5 143:7 308:18 voiced [1] 276:18 volley [1] 88:1 VP [2] 180:22 181:9</p>
-W-				
<p>treatments [3] 20:17 289:7 298:9 trends [2] 302:15,23 trials [1] 220:16 tried [9] 19:20 21:20 37:14 61:5,14 100:19 141:9 195:22 295:15 trigger [1] 246:17 truck [1] 140:19 true [4] 107:25 215:17 230:5 335:3 trust [2] 212:6 238:20 trustees [2] 101:19 154:19 truth [3] 211:24 212:11 228:1 truthfulness [2] 228:2 228:4 try [18] 8:5 19:23 21:3 26:22 72:13 136:21,23 151:14 162:20 212:18 221:3 229:21 289:11 290:18 292:12,16 294:19 308:8 trying [29] 19:13 20:5,8 28:1 30:19 32:22 36:14 53:15 63:7 66:19 113:3 131:19 135:18 147:15</p>	<p>uh-hm [18] 45:13 52:16 57:16 58:4 132:2,6 146:18 150:24 213:21 214:5 215:17 277:25 278:15 279:16 281:11 284:16 298:1 299:14 ultimate [1] 18:14 ultimately [6] 249:18 252:17 271:24,25 273:16 273:25 um-hm [34] 7:12 10:14 71:15 79:1 82:9 99:6 100:14 119:18 124:22 127:15 154:10 156:16 165:5 178:22 179:4 181:7 187:16,25 189:5 193:17 197:8 207:13 209:3 233:14 235:18 253:2 268:20 270:9 310:6 317:9 320:24 321:24 324:16 328:2 un [1] 240:13 un-redact [2] 240:21,25 unable [2] 21:22,23 unavailable [1] 179:23 uncertain [1] 83:20 uncomfortable [1]</p>	<p>understandable [1] 224:20 understands [1] 272:1 understood [13] 22:20 54:8 77:17 93:21 139:2 139:8 144:19 151:12 203:6 208:8 263:5 293:3 323:8 undertaken [1] 165:18 undertaking [1] 3:19 undesired [1] 187:10 unexpected [1] 187:10 unfair [3] 62:2 64:2 111:9 unfairly [1] 108:16 unfold [1] 100:3 unfolding [2] 99:25 119:10 unforgivable [1] 237:12 unfortunate [2] 9:1 238:21 unfortunately [1] 304:25 unhappiness [2] 70:14 70:25 uninhibited [1] 107:20 uninvolved [1] 184:7 unique [1] 287:5 unless [5] 78:14 83:15 102:1 159:6 239:25 Unlike [1] 229:1 unprecedented [1] 35:2 unprofessional [1] 237:3 unreasonable [1] 183:6 unsure [1] 51:25 unusual [2] 84:4 132:23 unwillingness [1] 72:4 up [74] 3:16 6:1,13,22 8:4 8:15 12:7 17:16,19 19:13 20:8 22:11,18 28:25 34:9 37:22 39:4 41:15 62:9 63:22 64:19 65:12 69:21 71:4 79:22 83:3,4,10 84:23 86:14 88:3 94:4 104:11 107:14 108:12 111:1,14 123:9 133:17</p>	<p>variables [6] 288:8,14 288:24 290:24 291:12 292:10 variety [3] 129:3,5 214:2 various [5] 57:12 127:7 128:9 252:13 330:10 vehicle [1] 281:18 Ventana [2] 34:22 311:16 verbally [2] 69:5 125:6 verify [2] 79:10 85:1 verses [2] 211:22 226:22 version [20] 41:5 56:8 58:23,24 59:5,8,10,14 59:17 60:3,10,15,24 162:13,14,25 206:2 208:6 241:6 266:16 versions [6] 42:2 59:20 59:25 162:20 240:14 326:6 versus [4] 228:3,4 271:8 272:2 via [2] 171:10 201:15 Vic [1] 165:14 vice [3] 127:3,24 309:24 view [22] 9:23 13:23,25 14:4 15:21,22 17:7 72:17 103:9 104:17,18 105:9 105:11 116:15 177:2 184:20 236:23 241:20 259:23 262:25 274:13</p>	<p>wait [4] 19:24 188:20 295:19,20 wanting [2] 129:24,25 wants [3] 94:17 105:2 236:14 Warning [1] 165:8 watch [1] 306:6 watched [3] 100:19 238:16,17 Waterford [2] 148:18 148:19 wavering [1] 152:18 ways [4] 76:11 110:11 169:5 313:4 wearing [1] 266:3 web [2] 277:20 282:23 website [9] 257:4 258:2 273:10 275:22 277:23 286:21 308:7 326:11 330:15 Wednesday [9] 6:20 100:12 105:19 116:17,22 118:6 119:11 123:20 124:1 week [33] 6:19 7:25 8:9 8:17 21:24 61:15,19,20 85:25 95:17 97:7 116:6 123:7,17,18 125:10 135:20,22 136:23 140:6 140:7 168:11 173:7 241:17 249:16,25 257:1 290:19 323:18,23 324:2 327:5 328:18 weekend [4] 43:10 144:2 170:8,12 weekend's [2] 160:4,16 weekly [2] 288:18 305:7 weeks [6] 66:24 81:15 295:20,21 297:24 298:14 Wegrynowski [1] 234:10 welcome [2] 33:25 130:19 well-developed [1] 243:18 Western [1] 1:15 whatnot [2] 234:11 307:6 whatsoever [3] 136:14 151:11 250:16 whereas [4] 45:20 248:6 262:19 270:3</p>
-V-				

<p>Wherever [1] 106:22 Whichever [1] 160:24 whip [3] 8:11 9:12 14:1 whipped [1] 110:21 white [2] 210:12 288:1 who'd [1] 185:16 who've [1] 142:19 whole [6] 46:16 59:24 165:22 210:19 237:2 274:24 wide [1] 129:4 Williams [48] 37:12,24 39:5 178:14 180:24 249:19 264:19 273:8 274:8 275:18 276:4 288:10 300:25 306:4,25 307:23 308:17,25 309:1 309:4,9,24 310:4 312:1 312:15,24 313:11,17 315:1 316:18 317:17 318:15,18 319:12,21 320:18 322:17 326:16 327:23 328:14 329:17 330:5 331:14 332:5,25 333:4,5,17 Williams' [1] 308:14 willing [2] 112:6,9 willingness [1] 294:7 wish [5] 76:11 194:16 205:13 243:6 279:13 within [46] 6:25 10:12 14:3 23:21 27:4 29:24 63:18 69:21 73:16 79:8 80:15 118:18 136:24 158:5 159:18 162:23 166:5 184:5 185:8,8 190:17 195:24 210:23 217:15 222:8 226:2 243:17 253:22,22 254:14 260:3 262:20 263:4 272:20 281:19 282:16 287:3 295:20 296:9 302:14 306:18 314:6,20 317:11 323:18 334:2 without [15] 42:11,24 43:12,16 103:11 107:9,9 148:3 216:22 217:4 218:10 219:4 253:21 275:3 327:14 witness [4] 176:11 177:1 177:3 239:11 woman [1] 81:12 women [4] 108:24 142:19,22 282:21 wonder [3] 294:23 302:3 325:20 wondered [1] 126:2 wondering [4] 8:1 81:23 82:22 300:10 word [12] 42:16,16 46:4 69:20 90:13 189:9 194:16 219:15 240:21 241:1 257:17 283:19 words [5] 59:2 179:12 181:20 215:23 228:2 worked [7] 39:24,25 110:6 129:19 148:6 197:1</p>	<p>247:13 works [3] 82:17,18 264:4 worn [1] 178:1 worried [3] 166:9,16 167:11 worries [1] 165:22 wrap [1] 69:21 write [6] 119:13 126:15 165:12 206:14 229:6 264:19 writes [2] 124:18 280:13 writing [15] 17:5 43:19 102:4 109:19 113:7 128:8 152:6 190:19 207:24 208:4 257:3 261:18 263:25 264:10 275:16 written [17] 36:3 41:20 47:4 78:18 101:18 112:24 113:1,19 125:6 127:1 129:19 130:2 207:4,6 242:11 250:16,20 wrong [16] 18:21 28:7 54:4,11 74:15 100:21 108:12 118:8 233:9 234:16 310:1 314:12 325:7 330:19 331:20 332:19 wrongly [1] 29:18 wrote [4] 110:7 113:4 149:18 250:15</p> <hr/> <p style="text-align: center;">-Y-</p> <hr/> <p>yard [1] 107:18 year [13] 18:6,18 24:13 49:17 53:23 91:20 95:16 111:4 210:3 218:19 305:19 313:6 327:21 years [7] 58:2 108:8 248:22 318:20 320:13,14 326:19 yesterday [4] 36:4 154:22 176:4 206:18 yet [5] 81:20 176:6 180:6 291:3 320:8 yourself [38] 3:13 7:2 7:21,24 30:8 33:10 36:1 42:19 54:10 56:6 57:19 66:9,12 72:2 78:3,7 107:2 114:21 119:12 121:14,23 124:5,17 130:13 131:24 141:16 143:5,10,22 145:8,24 149:8 154:21 157:22 161:14 165:3 282:2 306:8 yourselves [1] 136:12</p>			
--	--	--	--	--