

Approval of Minutes

TO: Joint BOD/Strategic Planning Committee on August 16, 2005

FROM: Lorie Harmon, Secretary

BACKGROUND: The Secretary of the Strategic Planning Committee respectfully submits the minutes of the meeting held on July 19, 2005.

The minutes have been reviewed and approved by Marcia Jackson, Chief Planning Officer, and Dr. Alan Larson, Strategic Planning Committee Chair; Dr. Rivera out of town

BUDGET IMPACT: None

COMMITTEE RECOMMENDATION:

Individual Action: X

Palomar Pomerado Health
JOINT MEETING OF THE BOARD OF DIRECTORS &
STRATEGIC PLANNING COMMITTEE
PMC – GRAYBILL AUDITORIUM
July 19, 2005

AGENDA ITEM	DISCUSSION	CONCLUSION/ACTION	FOLLOW-UP/ RESPONSIBLE PARTY
CALL TO ORDER	6:03 p.m.		
ESTABLISHMENT OF QUORUM	Dr. Larson, Nancy Bassett, R.N., Michael Covert, Linda Greer, Ted Kleiter, Bruce Krider, Dr. Otoshi, Dr. Rivera, and Director Scofield. Also attending were Gerald Bracht, Dr. Buringrud, Christine Meaney, Paul DeMuro, Jim Flinn, Carrie Frederick, George Gigliotti, Lorie Harmon, Stephanie Heames, Bob Hemker, Marcia Jackson, Dr. Kanter, Dr. Kung, Mike Shanahan, and Nick Xenitopoulos. Guests: Joe Hook, Craig McInroy, Tom Chessum, Eyal Perchik, Jerzey Wollak, Steve Yundt, Jenna MacDonald, Dennis McFadden, Greg Palmer, and Bradley Burke, with Studio E Architects.		
NOTICE OF MEETING	The notice of meeting was mailed consistent with legal requirements.		
PUBLIC COMMENTS	There were no requests for public comments.		
MINUTES June 21, 2005		MOTION: Motion made by Nancy Bassett, R.N., seconded by Bruce Krider, and carried for approval as presented.	

2

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ALL FACILITIES UPDATE (PMC EAST AND WEST, POM, AND SATELLITE OFFICES)	<p>Since the July 19 Strategic Planning Committee meeting was a Joint BOD/Strategic Planning Committee meeting, a partial update on the planning and process status of all affected PPH Facilities (PMC East & West, POM, & Satellite Offices) was provided, and due to time constraints, the rest of the presentation was deferred until the August Full BOD/Strategic Planning Committee meeting.</p> <p>Tom Chessum (Anshen + Allen) presented a review of highlights from the April 20, 2005 Strategic Planning Committee as follows:</p> <ol style="list-style-type: none"> 1. Project Status & Upcoming Milestones 2. Schematic Design <ul style="list-style-type: none"> • Each department needs to determine: <ol style="list-style-type: none"> a. Room/space proportions & adjacencies b. Circulation patterns c. Location of building elements, such as elevators, stairs, interdepartmental circulation, and shafts & closets 3. Review of Hospital Planning & Design <ul style="list-style-type: none"> • Historical Perspective • Strategy • Planning Models & Considerations – based on six criteria/principles: <ol style="list-style-type: none"> a. Flow b. Future Flexibility c. Functional Adjacencies d. Expandability e. Day Lighting/Connect to Nature f. Identity/Sense of Place 		

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	<p>Planning also includes Space Types & Methodology: "We must design as if the program is wrong..." including:</p> <ul style="list-style-type: none"> • Patient Care • High Technical – Clinical • High Technical – Support Services • Other – Administrative Support, Clinical Support, and Specialty <p>2. Other Planning Considerations:</p> <ul style="list-style-type: none"> • Single Organizing Element that provides: <ol style="list-style-type: none"> 1. Identity 2. Cultural and Social Reinforcement 3. Wayfinding Reference Point • Opportunity for Multiple Sub-identities <ol style="list-style-type: none"> 1. Women's and Children's 2. D & T Centers of Excellence 3. Outpatient 4. Public/Community Programs • Segregated Public, Private and Staff Flows especially <ol style="list-style-type: none"> 1. Public and Patient 2. Public & Staff • Locating and Configuring High Tech Clinical Space to: <ol style="list-style-type: none"> 1. Prioritize undifferentiated use and character 2. Prioritize visitor/patient ease of access • Ability to incrementally expand to 		

7

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	<p>600 Beds</p> <ol style="list-style-type: none"> 3. Form Givers – the Nursing Unit 4. Site & Planning Diagrams were also presented 5. Key Factor is Imagination; Imagine what we need to do to have: <ul style="list-style-type: none"> • The safest hospital for patients & staff • The highest patient & staff satisfaction • The best outcomes • The fewest errors • The lowest infection rates • The most efficient and cost effective operations • The most environmentally sustainable facilities and operations • The flexibility to accept the future's technology & practice <hr style="border-top: 1px dashed black;"/> <p>The agenda for the Joint BOD/Strategic Planning Committee Meeting on July 19 included:</p> <p><u>Project Status</u></p> <ul style="list-style-type: none"> • Project Schedules/Upcoming Milestones • Innovation Week – a one-week retreat, with presentations by User Group leads to members of Champion Teams, fellow User Group leads &/or surrogates, members of the Expansion Steering Committee, and outside resources (Architects, Center for Health Design, HealthTech) to take place August 15 – 19 at the Radisson in Rancho Bernardo. User Group leads need the opportunity to see what all other User Groups are proposing 		

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	<p>and how this might impact other departments or disciplines. Champion Team members and other outside experts need the opportunity to view plans with the User Groups to offer ideas for innovation based on their research.</p> <ul style="list-style-type: none"> • PMC Downtown Community Meeting - A presentation, similar to this, will be made as a public workshop on the evening of July 28 at the California Center for the Arts, Escondido. <p><u>Hospital Planning & Design</u></p> <ul style="list-style-type: none"> • <u>Innovations in Planning & Operations</u> <p><u>Champion Teams Status</u></p> <ol style="list-style-type: none"> 1. Recommendations to date 2. Current research teams and agenda <p><u>Schematic Implementation of Innovations</u></p> <ol style="list-style-type: none"> 1. Summary of Planning 2. Current & Pending Issues <ul style="list-style-type: none"> • <u>Evolving Design Concepts</u> <ol style="list-style-type: none"> 1. Palomar Medical Center West 2. Pomerado Hospital <p>The purpose of this presentation was to provide a Summary of 2005 Second Quarter Project Progress, including spreadsheet timelines as follows:</p> <p><u>Schedule Overview – PMC West, POM, and PMC East</u></p> <p><u>PMC West – Critical Path spreadsheet</u> – site preparation should be completed by the end of 2006; construction should start in mid-2007; by the end of</p>		

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	<p>2005, we should begin the structural systems design phase</p> <p><u>POM Hospital – Critical Path spreadsheet</u> - construction should be more on schedule, since POM is smaller, and already has an existing site; the building & parking lot will be built concurrently; POM construction should begin by mid-2007</p> <p><u>POM Hospital OSP</u> – is expected to start site preparation at the end of this year, and building construction early in 2007, and should be able to be occupied in March 2007; CEQA approval is the key to being able to start construction</p> <p><u>POM Hospital Parking Structure</u> – should receive CEQA approval by the end of this year, and construction should be complete in early 2007</p> <p><u>POM Hospital Central Plant</u> – PPH can do some replacements in the existing plant, and adding to as well, with anticipated construction completion by mid-2007</p> <p><u>PROJECT STATUS & UPCOMING MILESTONES</u></p> <p>Several of the Schematic Design elements and their corresponding Milestones were discussed, including:</p> <ul style="list-style-type: none"> • User Groups – schematic design User Group meetings are mostly completed • Selected User Groups Wrap-Up – ongoing, will wrap-up in August and September • Innovation Week is a new concept - will take place from August 15 through August 19 		

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	<ul style="list-style-type: none"> • Schematic Cost Check – September 2005 • Champion Teams – ongoing, have completed some – Implemented/Ongoing • Expansion Steering Committee – Program/Planning Issues Resolution & Follow-up, Project Scope Control <p><u>TOURS</u></p> <p>Three tours took place during June and July; Champion Team tech group went to Texas, and another group went to two Banner Hospitals – looked at acuity adaptability, interventional platform, and electronic medical records. At the end of August, Linda Urden, Mary Oelman, and Sharon Andrews are going to tour St. Joseph's. An additional tour to Shea Women's Center is planned for September 9. A tour to UCLA – Westwood is planned for August 29.</p> <p>Dr. Rivera wanted to know how the information gained from these tours would be shared with the Committee, and Marcia Jackson responded that a summary of the tours would be prepared and shared with Champion Teams and User Groups. Dr. Rivera also spoke about the Hospital of the Future, utilizing the latest in information technology, and asked if technology is a central design force for the new facility. Tom Chessum responded that we do need to comprehensively plan for technology, but that with the speed of technology enhancements we have to be flexible to wait to finalize some technology as late as we can to have the most current possible upon opening. Dr. Rivera strongly urged that we make sure that technology is central to the design.</p>		

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	<p><u>THE PHYSICIAN PLANNING ADVISORY COMMITTEE</u> continues to meet monthly.</p> <p><u>DESIGN DEVELOPMENT</u></p> <p>Equipment Planning meetings are scheduled for the 3rd and 4th weeks of September, and Design Development User Groups are scheduled to start in October 2005, based on the outcomes of Innovation Week.</p> <p>Ted Kleiter wanted to know where we are with schematics, and Tom Chessum answered that the end of August is the target date for completion. Ted also asked if we will be able to look at the schematics and cost estimates, and Marcia Jackson replied that the Committee would be able to look at these in October as part of the quarterly updates, provided that expansion processes proceed on schedule.</p> <p><u>PALOMAR MEDICAL CENTER EAST</u></p> <p>Mike Shanahan introduced Brad Burke, principal with Studio E Architects, who is an expert in mixed-use properties and helped develop a Master Plan for PMC East.</p> <p>Michael Covert challenged the Committee to open their eyes and minds to a new vision, and unveiled renovation and expansion plans for the facilities at the existing PMC East.</p> <p>This plan, including an anticipated \$72 million renovation of the facility, was presented with several</p>		

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	<p>variations on a theme, which ranged from the housing of the administrative offices, acute rehabilitation, and behavioral health program as previously planned, to the creation of up to 300 housing units for employees, some of which may even be mixed-use, with residential units located over retail and commercial spaces as can be found in downtown San Diego. Also unveiled under the same plans was a possible skilled nursing facility of at least 100 – 150 beds, with a focus on Geriatric and Alzheimer’s programs and treatment; hospital adjacent senior housing, Ambulatory Services, with an Urgent Care, and a 23-hour Outpatient Surgery and Extended Care Hotel, in the style of the Hilton or Marriott hotels; a Center for Advanced Surgery, where PPH could bring in physician trainers to train multiple surgeons in piloting new equipment technology and practices; a new downtown parking structure for both the hospital and the downtown community, community rooms, and possibly even a magnet high school.</p> <p>Realistically, the plan would require PPH to purchase an additional 4.5 acres, which extends the current site to Ivy Street on the west, Valley Parkway on the north, and Fig Street on the east. The City of Escondido would need to approve re-zoning of parts of this area, and some traffic pattern changes and road closures would be involved as well.</p> <p>In order to finance this venture, PPH would be looking at partnering with investors as a possible joint venture, or leasing parts of the development. The \$72 million committed from the G.O. Bond would only be spent on the previously proposed healthcare components of the Facilities Master Plan.</p>		

10

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	<p><u>KEY ISSUES</u> Brad Burke discussed the current state of downtown Escondido, which he believes to be in a Renaissance phase, with the City pushing opportunities for mixed-use areas along street edges, such as Grand Avenue and Valley Parkway. Several condominium projects and a four-star hotel are planned for the area west of the hospital. Mr. Burke believes that PMC East is in a very strategic spot for revitalization.</p> <p>A presentation, similar to this one made to the Committee, will be made as a public workshop on the evening of July 28 at the California Center for the Arts, Escondido.</p> <p><u>CHAMPION TEAM UPDATE</u> Carrie Frederick presented an update on the Champion Teams, including defining the role of the Teams: to scan the environment for trends/best practices, research specific topics at the request of the User Groups or architects, and evaluate/challenge design plans for creativity and innovative concepts.</p> <p>Activities to date included:</p> <ul style="list-style-type: none"> • Recommendations formulated and incorporated regarding Unit Configuration and Functioning, and Interventional Platform • Currently researching wireless systems for voice and data communication; wireless monitors; options, including robotics, for distribution of medications, and point-of-care testing • For Sustainability and Healing Environment, researching costs/benefits of pursuing designation as “green” building 		

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	<ul style="list-style-type: none"> • DNA (Diverse Nontraditional Alternatives) Team created avenue to gather innovative ideas by soliciting them from staff, looking at practices in other industries, and scanning the environment for ideas the can be adapted to PPH. 		
COMMITTEE COMMENTS, SUGGESTIONS	Due to the previously mentioned time constraints, further Facility Update presentations will be made to the August 16 Full BOD/Strategic Planning Committee meeting. Additional topics include a recap of Info Technology, including the past and present methodology, and future options.		
FINAL ADJOURNMENT	7:50 p.m.		
SIGNATURES			
Committee Chairperson	_____ Marcelo Rivera, M.D., Alan Larson, M.D.		
Recording Secretary	_____ Lorie Harmon		

12