

# BOARD OF DIRECTORS AGENDA PACKET

February 13, 2006

The mission of Palomar Pomerado Health is to heal, comfort and promote health in the communities we serve.

## PALOMAR POMERADO HEALTH BOARD OF DIRECTORS

Marcelo R. Rivera, MD, Chairman
Nancy L. Bassett, RN, MBA, Vice Chairman
Linda C. Greer, RN, Secretary
T. E. Kleiter, Treasurer
Bruce G. Krider, MA
Alan W. Larson, MD
Nancy H. Scofield
Michael H. Covert, President and CEO

Regular meetings of the Board of Directors are usually held on the second Monday of each month at 6:30 p.m., unless indicated otherwise

For an agenda, locations or further information call (858) 675-5106, or visit our website at www.pph.org

#### MISSION STATEMENT

The Mission of Palomar Pomerado Health is to: Heal, Comfort, Promote Health in the Communities we Serve

#### **VISION STATEMENT**

Palomar Pomerado Health will be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services

#### **CORE VALUES**

Integrity

To be honest and ethical in all we do, regardless of consequences

**Innovation and Creativity** 

To courageously seek and accept new challenges, take risks, and envision new and endless possibilities

Teamwork

To work together toward a common goal, while valuing our difference

Excellence

To continuously strive to meet the highest standards and to surpass all customer expectations

Compassion

To treat our patients and their families with dignity, respect and empathy at all times and to be considerate and respectful to colleagues

Stewardship

To inspire commitment, accountability and a sense of common ownership by all individuals

#### Affiliated Entities

Escondido Surgery Center \* Palomar Medical Center \* Palomar Medical Auxiliary & Gift Shop \* Palomar Continuing Care Center \* Palomar Pomerado Health Foundation \* Palomar Pomerado Home Care \* Pomerado Hospital \* Pomerado Hospital Auxiliary & Gift Shop \* Palomar Pomerado Health Concern \* Ramona Radiology Center \* VRC Gateway & Parkway Radiology Center \* Villa Pomerado

Palomar Pomerado North County Health Development, Inc.\*

# PALOMAR POMERADO HEALTH BOARD OF DIRECTORS REGULAR MEETING AGENDA

Monday, February 13, 2006

Open Session commences 6:30 p.m.

Palomar Medical Center Graybill Auditorium 555 E. Valley Parkway Escondido, California

# OPEN SESSION commences at 6:30 p.m. PMC Graybill Auditorium

Time Page CALL TO ORDER I. 5 min **OPENING CEREMONY** II. Pledge of Allegiance Recitation - Chaplain Bill Hard В. Mission & Vision - Board Member C. "The mission of Palomar Pomerado Health is to heal, comfort and promote health in the communities we serve." "The vision of PPH is to be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services." 5 **PUBLIC COMMENTS** III. (5 mins allowed per speaker with cumulative total of 15 min per group - for further details & policy see Request for Public Comment notices available in meeting room). 3 \* MINUTES IV. 1-10 Regular Board Meeting - January 9, 2006 Special Joint Board and Regular Finance Committee Meeting - January 26, 2006 (separate cover) 11 APPROVAL OF AGENDA to accept the Consent Items as listed V. Revolving Fund Transfers/Disbursements - December, 2005 \$27,919,080.00 1. Accounts Payable Invoices 12,174,292.00 2. Net Payroll \$40,093,372.00 Total Ratification of Paid Bills "In observance of the ADA (American with Disabilities Act), please notify us at 858-675-5106, 48 hours prior to the meeting so that we may provide reasonable accommodations"

> Asterisks indicate anticipated action; Action is not limited to those designated items.

# VI. PRESENTATIONS -

|      | A. Presentation by Duane Dauner, President of California Hospital Association (CHA) of the 2005 Leadership in Governance Award to Alan W. Larson, M.D., former Chairman and current Director of Palomar Pomerado Health (PPH) as one of the top Healthcare Trustees in the State;                              | 10                        |
|------|--|---------------------------|
|      | B. "Professional Enhancement Program" (PEP) Presentation by Lorie Shoemaker, Chief Nurse Executive   | 15                        |
|      |  |                           |
| VII. | REPORTS  A. Medical Staffs   | 15                        |
|      | * 1. Palomar Medical Center – Robert D. Trifunovic, M.D. a. Credentialing/Reappointments   | 12-24                     |
|      | b. Additional Medical Staff Credentialing (Patrick M. O'Meara, M.D.)   | 25                        |
|      | * 2. Escondido Surgery Center – Marvin W. Levenson, M.D. a. Credentialing/Reappointments   | 26                        |
|      | <ul> <li>* 3. Pomerado Hospital – Paul E. Tornambe, M.D.</li> <li>a. Credentialing/Reappointments</li> <li>b. Amendment to Pomerado Hospital OB/GYN Rules &amp; Regulations</li> </ul>   | 27 <b>-</b> 28<br>29      |
|      | <ul> <li>B. Administrative</li> <li>1. President of Palomar Pomerado Health Foundation – Pauline Getz</li> <li>a. Update on PPHF Activities</li> </ul>   | 5 Verbal Report           |
|      | <ol> <li>Chairman of the Board – Marcelo R. Rivera, M.D.</li> <li>a. Escondido City Council Meeting February 8</li> </ol>  | 10 Verbal Report          |
|      | <ul> <li>b. 2006 Health Policy Legislative Day, February 22, Sacramento</li> <li>c. CHA/AHA Annual Meeting, April 30-May 3, Washington D.C.</li> <li>d. "Go Red for Women" Conference, February 3, San Diego (PPH Primary</li> </ul>   |                           |
|      | Sponsor/PPH Proclamation from County Board of Supervisors)  e. January 11 Letter from Escondido Chamber of Commerce in support of zoning amendment re: ERTC campus   |                           |
|      | <ul> <li>President and CEO – Michael H. Covert</li> <li>a. Resolution No. 02.13.06 (01) – 01 Amendment to         December 12, 2005 PPH Annual Review and Approval of Amended and Restated Bylaws – current amendment due to a typographical error, and that "Chief Planning Officer" continue     </li> </ul> | 10 Verbal Report<br>30-79 |
|      | under Non-Voting Membership of the Strategic Planning Committee section of the Bylaws as originally approved in October 2004, instead of "Chief Marketing and Communications Officer" b. Q12 Survey Results c. Patient Loyalty/Service Excellence Scores d. "Innovation Week" January 31-February 3            |                           |

Asterisks indicate anticipated action; Action is not limited to those designated items.

# VIII. INFORMATION ITEMS (Discussion by exception only)

| Δ                | Nursing Skill Mix Study Results                       | Human Resources     | 80-82 |
|------------------|---|---------------------|-------|
| D.               | Annual Review of PPH Bylaws HR segment                | Human Resources     |       |
| <i>Б</i> .<br>С. | To and and  | Human Resources     | 02.00 |
| D.               | Campus Updates  | Community Relations | 83-88 |
| E.               | PPH Web presentation                                  | Community Relations |       |
| F.               | Expansion Communications Update                       | Community Relations |       |
| G.               | Focus Groups Preview                                  | Community Relations |       |
| H.               | Media Update  | Community Relations |       |
| I.               | Monthly Reports (November & December 2005)            | Community Relations |       |
| J.               | Sustainable Champion Teams                            | Strategic Planning  | 89-91 |
| K                | Physician Recruitment Update                          | Strategic Planning  |       |
| Ĺ.               | Audit Risk Assessment for 2006/                       | Internal Audit      | 92    |
|                  | Internal Audit Committee Charter (tabled)/            |                     |       |
|                  | Internal Audit Committee Role & Responsibilities/     |                     |       |
|                  | Annual Audit Performance & Report by Deloitte Touche/ |                     |       |
|                  | 2006 Meetings Schedule                                |                     |       |
|                  |   |                     |       |

- IX. COMMITTEE REPORTS for Finance Committee see also under Consent Items
- X. BOARD MEMBER COMMENTS/AGENDA ITEMS FOR NEXT MONTH
- XI. FINAL ADJOURNMENT

# Palomar Pomerado Health BOARD OF DIRECTORS REGULAR BOARD MEETING Pomerado Hospital, Meeting Room E, Poway Monday, January, 9, 2006

| AGENDA ITEM                                   | DISCUSSION                                       | CONCLUSIONS/ACTION                  | FOLLOW-                  |
|---|--|-------------------------------------|--------------------------|
|   |  |                                     | UP/RESPONSIBLE<br>PAPITY |
|   |  |                                     | FAKII                    |
| CALL TO ORDER                                 | 6:35 pm  |                                     |                          |
|   | Quorum comprised Directors Bassett, Greer,       |                                     |                          |
|   | Krider, Larson, Rivera and Scoffeld.             |                                     |                          |
|   | Regrets from Director Kleiter due to illness.    |                                     |                          |
| OPENING CEREMONY                              | The Pledge of Allegiance was recited in          |                                     |                          |
|   | unison, followed by an inspirational reading     |                                     |                          |
|   | by Chaplain Walden (attached to original         |                                     |                          |
|   | minutes)   |                                     |                          |
| MISSION AND VISION                            |  |                                     |                          |
| STATEMENTS                                    |  |                                     |                          |
|   | The PPH mission and vision statements were       |                                     |                          |
|   | read by Director Scoffeld, as follows:           |                                     |                          |
|   |  |                                     |                          |
|   | The mission of Palomar Pomerado Health is to     |                                     |                          |
|   | heal, comfort and promote neatin in the          | •                                   |                          |
|   | communities we serve.                            |                                     |                          |
|   | The vision of PPH is to be the health system of  |                                     |                          |
|   | choice for patients, physicians and employees,   |                                     |                          |
|   | recognized nationally for the highest quality of |                                     |                          |
|   | clinical care and access to comprehensive        |                                     |                          |
|   | services.  |                                     |                          |
| NOTICE OF MEETING                             | Notice of Meeting was mailed consistent with     |                                     |                          |
| PIRITE COMMENTS                               | None   |                                     |                          |
| ADDOMAT OF MINITES                            |  | MOTION: by Krider, 2nd by           |                          |
| AFFROVAL OF MINOTES  December 12, 2005 Annual |  | Scoffeld and carried to approve the |                          |
| Meeting                                       |  | minutes of the December 12, 2005    |                          |
| December 20, 2005 Joint                       |  | Annual Meeting, and the December    |                          |
| Board/Strategic Planning                      |  | 20, 2005 Joint Board/Strategic      |                          |
| Committee Meeting                             |  | Planning Committee Meeting as       | **                       |
|   |  | submitted. All in favor. None       |                          |
|   |  | Opposed.                            |                          |
| APPROVAL OF AGENDA to                         |  | MOTION: by Knder, 2 <sup></sup> by  |                          |
| accept the Consent Items as listed            |  | SCOTION and values to approve       |                          |

u\text{u\text{rot}} und docs\text{pph bd migs 2006\text{reg bd mins 01-09-06\text{redm}}}

| FOLLOW-<br>UP/RESPONSIBLE<br>PARTY |   |              |         |               |                        |  |  |  |  |   |   |  |  |  |  |
|------------------------------------|---|--------------|---------|---------------|------------------------|--|--|--|--|---|---|--|--|--|--|
| CONCLUSIONS/ACTION                 | Consent Items as submitted. All in favor. None opposed. |              |         |               |                        | MOTION: by Scofield, 2 <sup>nd</sup> by Krider and carried to approve the PMC Medical Staff Executive                          | Committee credentialing recommendations for the PMC Medical Staff, as presented.                             | All in tavor. None opposed.  Directors Bassett and Larson abstained to avoid potential conflict of interest.                                     | Director Greer declined to vote.  Director Kleiter absent. | As this was a 4-2 vote against due to inability to obtain a quorum vote, and noting that Director Kleiter was | absent, Autorney Faul Dewigon<br>inquired if there were any medical<br>staff credentials expiring at the end of | January. As a result, the imital motion was withdrawn by Director Scoffeld, 2 <sup>nd</sup> by Krider and carried. | Attorney DeMuro then suggested a motion for the credentialing of the remainder of the PMC Medical Staff as submitted, excluding Kenneth G. | Trestman, M.D. due to Board Member conflicts of interest, declination and absence. | MOTION: by Bassett, 2 <sup>nd</sup> by Scoffeld and carried to approve the |
| DISCUSSION                         |   | None         |         |               |                        | Chairman Rivera welcomed Dr. John Lilley as PMC Chief of Staff elect, and Dr. Robert Triftmovic as DMC Chief of Staff together | with the returning Pomerado Chief of Staff, and Chief of Staff elect, Drs. Tornambe and Kanter respectively. | Robert D. Trifunovic, MD., Chief of PMC Medical Staff, then presented PMC's requests for approval of Credentialing Recommendations as submitted. |  |   |   |  |  |  |  |
| AGENDA ITEM                        |   | PRESENTATION | REPORTS | Medical Staff | Palomar Medical Center | - Credentialing  |  |  |  |   |   |  |  |  |  |

| FOLLOW-            | UP/RESPONSIBLE<br>PARTY |                             |                         |                             | 4                                    |                                   |                                     |                                |                            |  |                                      |  |                                 |  | :-                       |                   |                                     |                                      |                                     |                                       |                                   |                                      |   |               | :.            |  |                             |                                 |                              |            |                             |                                   |                                 |                                  |                          |                    |  |
|--------------------|-------------------------|-----------------------------|-------------------------|-----------------------------|--------------------------------------|-----------------------------------|-------------------------------------|--------------------------------|----------------------------|--|--------------------------------------|--|---------------------------------|--|--------------------------|-------------------|-------------------------------------|--------------------------------------|-------------------------------------|---------------------------------------|-----------------------------------|--------------------------------------|---|---------------|---------------|--|-----------------------------|---------------------------------|------------------------------|------------|-----------------------------|-----------------------------------|---------------------------------|----------------------------------|--------------------------|--------------------|--|
| CONCLUSIONS/ACTION |                         | PMC Medical Staff Executive | Committee credentialing | recommendations for the PMC | Medical Staff as presented, with the | exception of Kenneth G. Trestman, | M.D., due to inability of the Board | to optain a quorum vote on the | latter due to Board Member | conflicts of interest, declination and | absence. All in lavor. None opposed. | Discontras I among aboutained director | Director Larson abstance due to | potential commet of interest.  Director Greer declined to vote | Director Kleiter absent. | Motion passed 4-2 | Following inquiry by Paul DeMuro as | to whether a separate 4-2 vote could | be obtained for Dr. Trestman, as if | not, it might mean a separate special | board meeting, it appeared that a | quorum vote was possible as Director | Larson agreed to vote for Dr. Trestman concerning PMC | Cradentialing | Credentaling. | MOTION: by Scoffeld, 2 <sup>nd</sup> by Krider | and carried to approved PMC | Medical Staff Credentialing for | Kenneth G. Trestman, M.D. as | submitted. | All in lavor. None opposed. | Director Bassett abstained due to | notential conflict of interest. | Director Greer declined to vote. | Director Kleiter absent. | Motion passed 4-2. |  |
| DISCUSSION         |                         |                             |                         |                             |                                      |                                   |                                     |                                |                            |  |                                      |  |                                 |  |                          |                   | DMC Medical Staff Credentialing     | - Kenneth G Trestman M.D.            |                                     |                                       |                                   |                                      |   |               |               |  |                             |                                 |                              |            |                             |                                   |                                 |                                  |                          |                    |  |
| AGENDA ITEM        |                         |                             |                         |                             |                                      |                                   |                                     |                                |                            |  |                                      |  |                                 |  |                          |                   |                                     | •                                    |                                     |                                       |                                   |                                      |   |               |               |  |                             |                                 |                              |            |                             |                                   |                                 |                                  |                          |                    |  |

| FOLLOW-<br>UP/RESPONSIBLE<br>PARTY |                          |   |                                   |                             |  |  |                    |                   |   |                               |  |  |   |   |
|------------------------------------|--------------------------|---|-----------------------------------|-----------------------------|--|--|--------------------|-------------------|---|-------------------------------|--|--|---|---|
| CONCLUSIONS/ACTION                 |                          | MOTION: by Scofield, 2 <sup>nd</sup> by Bassett and carried to approve the PMC Medical Staff Executive                      | recommendations for the Escondido | All in favor. None opposed. | Director Larson abstained due to potential conflict of interest. | Director Greer declined to vote.  Director Kleiter absent. | Motion passed 4-2. | G                 | MOTION: by Scofield, 2 <sup>nd</sup> by Krider and carried to approve the Pomerado Hospital Medical Staff Executive Committee credentialing recommendations for the Pomerado Medical Staff, as presented. All in favor None comosed | All III tayot. Ivone opposed. | Directors Bassett and Larson abstained to avoid potential conflicts of interest.  Director Greer declined to vote. | Director Kleiter absent. Tied vote 3-3. Motion failed. | The initial motion was withdrawn by Director Scoffeld, 2 <sup>nd</sup> by Krider and carried. | Attorney DeMuro then suggested a motion for the credentialing of the remainder of the Pomerado Medical Staff as submitted, excluding Kenneth G. Trestman, M.D. due to Board Member conflicts of interest, |
| DISCUSSION                         |                          | Marvin W. Levenson, MD, Administrator/ Medical Director of the Escondido Surgery Center, presented requests for approval of | Creaming recommendations.         |                             |  |  |                    |                   | Paul E. Tornambe, MD., Chief of Pomerado<br>Medical Staff, presented Pomerado Hospital's<br>requests for approval of Credentialing<br>Recommendations.  |                               |  |  |   |   |
| AGENDA ITEM                        | Escondido Surgery Center | <ul> <li>Credentialing</li> </ul>   |                                   |                             |  |  |                    | Pomerado Hospital | - Credentialing   |                               |  |  |   |   |

| AGENDA ITEM  | DISCUSSION   | CONCLUSIONS/ACTION                                       | FOLLOW-                                |
|--|--|--|--|
|  |  |  | UP/RESPONSIBLE<br>PARTY                |
| 100 April 100 Ap |  | declination and absence.                                 |  |
|  |  | MOTION: by Scoffeld, 2 <sup>nd</sup> by                  |  |
|  |  | Krider and carried to approve the                        |  |
|  |  | Pomerado Medical Staff Executive                         |  |
|  |  | Communice credentialing recommendations for the Pomerado |  |
|  |  | Medical Staff as presented, with the                     |  |
|  |  | exception of Kenneth G. Trestman,                        |  |
|  |  | M.D., due to inability of the Board                      |  |
|  |  | to obtain a quotum vote on the                           |  |
|  |  | conflicts of interest declination and                    |  |
|  |  | absence. All in favor. None opposed.                     |  |
|  |  | T T  |  |
|  |  | Director Larson abstained due to                         |  |
|  |  | Director Greer declined to vote.                         |  |
|  |  | Director Kleiter absent.                                 |  |
|  |  |  |  |
|  |  | Motion passed 4-2.                                       |  |
|  | Pomerado Medical Staff Credentialing   | Following discussion with Chairman                       | This Pomerado                          |
|  | - Kenneth G. Trestman, M.D.  | Rivera, the Board and Attorney Paul                      | Medical Staff                          |
|  |  | DeMuro, and due to the perceived                         | credentialing item                     |
|  |  | inability to obtain a board quorum                       | Treetman M.D. to be                    |
|  |  | Credentialing for Kenneth G                              | brought back for vote                  |
|  |  | Trestman, M.D. as submitted because                      | to the January 25.                     |
| · · · · · · · · · · · · · · · · · · ·  | · ·  | of Board Member conflicts of                             | 2006 Special Board                     |
|  |  | interest, declination and absence, it                    | Meeting.                               |
|  |  | was agreed to bring the credentialing                    |  |
|  | and the second s | of Dr. Trestman back to a Special                        |  |
|  |  | For Immering previously scheduled                        |  |
|  |  | within the January timeframe.                            |  |
| Administrative   |  |  |  |
| Chairnerson - Palomar Pomerado   | Ms Pauline Getz  |  |  |
| Health Foundation  |  |  | ************************************** |
|  | a c a c a c a c a c a c a c a c a c a c  | Me Catz was thanked for her                              |  |
|  | Ms Pauline Getz, on benair of the Foundation, reported that everything was going well at the   | informative report.                                      |  |
|  | Foundation, and that a draft of a facility   |  |  |

| FOLLOW-<br>UP/RESPONSIBLE<br>PARTY |   |   |  |  |   | On behalf of the Board, a commendation letter to Mr. Bowersox to be drafted for the Chairman's signature and taken to be read January 27.   |   |
|------------------------------------|---|---|--|--|---|---|---|
| CONCLUSIONS/ACTION                 |   |   |  | MOTION: by Rivera, 2nd by Bassett and carried that Director T. E. Kleiter be appointed as Treasurer of the Board of Directors.  All in favor. None opposed.  The Board warmly congratulated Director Kleiter on his appointment as Treasurer for 2006, which was now two successive years, and noting that he was on the Board of ACHD and the BETA policy-making Board. |   | It was suggested that on behalf of PPH Board of Directors, a letter of commendation to Mr. Bowersox be presented to him on the occasion of his retirement at the January 27 event in his honor.   | Mr. Covert wished to thank his Staff for the 3-year award pin noting that he was very appreciative of them all.                 |
| DISCUSSION                         | naming policy had been reviewed.  In addition, the Legacy Circle is being refined.  At the end of January it was anticipated there would be extensive emphasis on Best Practices, Improvement of Board Performance and training with reports being back to both Boards for a potential joint boards meeting | with EMT later in the spring to develop plans and strategies for the capital campaigns.  Two further Foundation board members had been recruited, with recruitment of energetic members continuing. | Marcelo R. Rivera, MD                              |  | Chairman Rivera reminded of the Special Board Educational Meeting Friday, January 13 with Mr. Curt Nonomaque, CEO of VHA. Chairman Rivera reminded of the Special Board Annual CEO Evaluation Meeting to be bold Wednesday, January 25. | Chairman Rivera reminded of the January 27 Chairman Rivera reminded of the January 27 Salute to the Retirement of Mr. Jim Bowersox, first City Manager of the City of Poway, noting that there would be representation from the Board of Directors at this event. | Chairman Rivera took pleasure in presenting Mr. Covert with his first (3-year) PPH lapel pin as CEO of Palomar Pomerado Health. |
| AGENDA ITEM                        |   |   | Chairman of the Board - Palomar<br>Pomerado Health | • Appointment of Treasurer   | <ul> <li>Special Board Educational</li> <li>Meeting January 13</li> <li>Special Board Annual CEO</li> <li>Evaluation Meeting January</li> </ul>   | • January 27 Salute to Retirement of Mr. Jim Bowersox, City Manager of the City of Poway  | 3rd Year Employee Award     Pin to CEO  |

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| AGENDA ITEM                | DISCUSSION   | CONCLUSIONS/ACTION | FOLLOW-                                   |
|----------------------------|--|--------------------|---|
|                            |  |                    | UP/RESPONSIBLE<br>PARTY                   |
| President and CEO          | Michael H. Covert  |                    |   |
| Chief Information Officer  | Mr. Covert reported that excellent candidates  |                    |   |
|                            | tor this position are currently being interviewed including a strong internal  |                    |   |
|                            | candidate and the outcome will be shared in  |                    |   |
|                            | the near future.   |                    |   |
| Foundation Chief Executive | Mr. Covert continued that the candidates for   |                    |   |
| Officer                    | this Foundation position will be here at the end   |                    | -   |
|                            | of January and that the recruitment committee  | *:                 | ÷   |
|                            | will be involved, including Directors Krider   |                    |   |
| CHIVEL                     | and Larson.  |                    | Donal Accident                            |
| • JCAHO                    | In addition, we had join well by interest of the state of |                    | board Assistant to                        |
|                            | Massaro of JCAHO and Opar Remoold, noung   |                    | Ionow up regarding Dr. Massaro's visit in |
|                            | hospitals around the country chosen by   |                    | conjunction with a                        |
|                            | ICAHO and that it was likely that in March   |                    | Special Board                             |
|                            | there would be a Special Board Educational   |                    | Educational Meeting.                      |
|                            | session regarding JCAHO and PPH's  |                    | (Since agreed to be                       |
|                            | involvement presented by Dr. Massaro.  |                    | Friday, March 31 at                       |
|                            |  |                    | II:30 a.m.)                               |
| Schematic Design Phase     | The CEO reported on the Schematic Design   |                    | •   |
|                            | Phase of the new hospital and the User Groups  |                    |   |
|                            | together with the architects who will gather for   |                    |   |
|                            | the second PPH "Innovation Week" to be held  |                    |   |
|                            | January 31-February 3 at the California Center   |                    |   |
|                            | for the Arts, Escondido.   |                    |   |
| "Expert Advisory Panel"    | On Monday, January 30 Mr. Covert noted that  |                    |   |
|                            | we would have an outstanding "Expert   |                    |   |
|                            | Advisory Panel" present and to which the   |                    |   |
|                            | Board was cordiany invited to attend.  |                    |   |
|                            | Members of the panel will be noth trul-noth,   |                    | ÷   |
|                            | LEM and physicians involved in termistic   |                    |   |
|                            | meet. It was noted that this had not been done   |                    |   |
|                            | before in this format and that the panel were as   |                    |   |
|                            | excited as we were in this regard. We looked   |                    |   |
|                            | forward to what they think of our future plans.  |                    |   |
| Facilities Locations       | Regarding our various locations, we are  |                    |   |
|                            | moving forward on planning and zoning  |                    |   |
|                            | activities so that we may start working on   |                    |   |
|                            | those facilities.  |                    |   |

|                      | TAG TAG TAG TAG                                    | NOTITIONS/ACTION  | FOLLOW.        |   |
|----------------------|--|---|----------------|---|
| AGENDA ITEM          | DISCUSSION   |   | UP/RESPONSIBLE |   |
|                      |  |   | PARTY          |   |
|                      | In addition, discussions have been held with       |   |                |   |
|                      |  |   |                |   |
|                      | on presentation of materials through the City      |   |                |   |
|                      | Council concerning MOU S etc.                      |   |                |   |
| Press-Ganey          | Mr. Covert reported unat we are going to           |   |                |   |
|                      | engage riess Ganey in our customer                 |   |                |   |
|                      | Satisfaction surveys, noting that John and         | • •   |                |   |
|                      | CIVIS nave been involved and that whatvel we       | , in the second |                |   |
|                      | nave utilized in this regard with Canary, 1 1000   |   |                |   |
|                      | co that we may commare ourselves regionally.       |   | ٠              |   |
|                      | which we have not been able to do with             |   |                |   |
|                      | Gallup. Questions will be similar but it will      | 7   |                |   |
|                      | 94   |   |                |   |
|                      | provided with more information than                |   |                |   |
|                      | previously.  |   |                |   |
| 27                   |  |   |                |   |
|                      | Following a question from Director Scoffeld,       |   | •              |   |
|                      | Mr. Covert clarified that we will continue with    |   |                |   |
|                      | Gallup in the employee engagement and              |   |                |   |
|                      | physician surveys, but regarding the               |   |                |   |
|                      | patient/customer satisfaction surveys, the         |   |                |   |
|                      | decision was made to engage Press Ganey in         |   |                |   |
|                      | that area as they are able to provide us with      |   |                |   |
|                      | wider and more detailed comparative                |   |                |   |
|                      | information.                                       |   |                | _ |
| Memorial Service for | Mr. Covert relayed that the memorial service       |   |                |   |
| Mr. Sam Stein        | for Mr. Sam Stein, who had been of great           |   |                |   |
|                      | support in his interest of, and generosity w,      |   |                |   |
|                      | Palomar Pomerado nealm, would be used              | •   |                |   |
| ٠                    | Demay 11 to 12 to 12                               |   |                |   |
|                      | roway.   |   |                |   |
|                      | Chairman Rivera wished to acknowledge              |   |                |   |
|                      | the life, work and generosity shown by             |   |                |   |
|                      | Mr. Sam Stein who will be sadly missed in the      |   |                |   |
|                      | community.   |   |                | Т |
| Q12 Employee Survey  | PPH employees responded to the challenge in        |   |                |   |
| Participation        | the latest (112 survey with an aggressive goal     |   |                |   |
|                      | of 90% participation and target was compressed a 1 |   |                |   |
|                      | 21 Kudos to Iim Flinn and to Sheila Brown          |   |                | _ |
|                      | 71. INMOV VV VIII                                  |   |                |   |

u/my docs/pph bd mtgs 2006/reg bd mtg 01-09-06/reg bd mins 01-09-06:cdm

| F                                  | T  |                              | 1  |  |  |  | Γ :   | Ι   |  |  | T  |   |   |  |   |
|------------------------------------|--|------------------------------|--|--|--|--|---|---|--|--|--|---|---|--|---|
| FOLLOW-<br>UP/RESPONSIBLE<br>PARTY |  |                              |  |  |  |  |   | , i   |  |  |  |   |   |  |   |
| CONCLUSIONS/ACTION                 |  |                              |  |  |  |  |   | MOTION: by Scoffeld, 2 <sup>nd</sup> by Larson and carried that the Public Bid    | and Procurement-Prequalification of<br>Contractors process as submitted be             | approved.<br>All in favor. None opposed. | MOTION: by Scoffeld, 2 <sup>nd</sup> by Bassett and carried that the Phase I Development, Pomerado Hospital              | Expansion as submitted be approved. All in favor. None opposed. |   |  |   |
| DISCUSSION                         | who were at 100% participation. Results will be shared with Human Resources, the Board and all involved. | Discussion by exception only | Director Krider, Committee Chairman, referred to the Educational Session – Facilities Master | Plan, Cost Accumulation & Control System; and the 2006 Meeting Schedule, both of which | appeared under separate cover and were presented to the Board for information. |  | Finance Committee action items (if any) reported under Consent Items. | Director Krider, Committee Chairman, respectfully requested Board approval of the | Public Bid and Procurement-Prequalification of Contractors process, as submitted under | separate cover.                          | Director Krider, Committee Chairman, respectfully requested Board approval of the Phase I Development, Pomerado Hospital | Expansion, as submitted under separate cover.                   | Director Greer relayed that she appreciated becoming Secretary of the Board of Directors at the December 2005 Annual Board Meeting and had enjoyed and learned much in her first year working with the Board, Staff and | Director Bassett noted her appreciation of the Board of Directors in being re-appointed to the position of Vice Chairperson at the December 2005 Annual Meeting. | In addition, Director Bassett referred to a letter to the editor in Sunday's edition of the North County Times regarding a wait-time of five hours in the ED by an apparent stroke patient. Director Bassett requested that Staff inquire |
| AGENDA ITEM                        |  | INFORMATION ITEMS            | ■ Facilities & Grounds   |  |  | <ul> <li>Strategic Planning</li> </ul> | COMMITTEE REPORTS   | Facilities & Grounds     Public Bid and   | Procurement-<br>Dramalification of   | Contractors                              | Phase I Development, Pomerado Hospital Expansion   |   | BOARD MEMBER<br>COMMENTS/AGENDA ITEMS<br>FOR NEXT MONTH   |  |   |

| AGENDA ITEM                         | DISCUSSION   | CONCLUSIONS/ACTION | FOLLOW-<br>UP/RESPONSIBLE<br>PARTY |
|-------------------------------------|--|--------------------|------------------------------------|
|                                     | directly into this matter as to occurrence and status. This has since been followed up and resolved by Staff who have responded to the Board.        |                    |                                    |
|                                     | Chairman Rivera relayed his appreciation for<br>the Board's support and continued conduction<br>of meetings in a professional and orderly<br>manner. |                    |                                    |
| ADJOURNMENT                         | 7:20 p.m.  |                    |                                    |
| SIGNATURES                          |  |                    |                                    |
| <ul> <li>Board Secretary</li> </ul> |  |                    |                                    |
|                                     | Linda C. Greer, R.N.   |                    |                                    |
| Board Assistant                     |  |                    |                                    |
|                                     | Christine D. Meaney  |                    |                                    |

# PALOMAR POMERADO HEALTH CONSOLIDATED DISBURSEMENTS FOR THE MONTH OF DECEMBER, 2005

| 12/01/05                        | ТО           | 12/31/05       | ACCOUNT        | S PAYABL      | E INVOICES    | \$27,9         | 19,080.00 |
|---------------------------------|--------------|----------------|----------------|---------------|---------------|----------------|-----------|
| 12/02/05                        | TO           | 12/30/05       | NET PAYR       | OLL           |               | \$12,1         | 74,292.00 |
|                                 |              |                |                |               |               | \$40,0         | 93,372.00 |
| I hereby state tand payroll fun |              |                |                |               |               | e, patient ref | und       |
|                                 |              |                |                |               | /             |                |           |
|                                 |              |                |                | CHIEF         | FINANCIAL O   | FFICER         |           |
| APPROVAL OF                     | REVOLV       | ING, PATII     | ENT REFUNI     | AND PAY       | ROLL FUND     | DISBURSEM      | ENTS:     |
| Гreasurer, Boa                  | ard of Direc | ctors PPH      |                |               |               |                |           |
| Secretary, Boa                  | rd of Direc  | ctors PPH      |                |               |               |                |           |
| his approved                    | document     | is to be attac | shed to the la | est royalving | r fund dishum | amont name     | -64b-     |

applicable financial month for future audit review.

cc: M. Covert, G. Bracht, R. Hemker, J. Flinn

# MEDICAL STAFF SERVICES

January 24, 2006

TO:

Board of Directors

**BOARD MEETING DATE:** 

February 13, 2006

FROM:

Robert D. Trifunovic, M.D., Chief of Staff PMC Medical Staff Executive Committee

SUBJECT:

Medical Staff Credentialing Recommendations

#### PALOMAR MEDICAL CENTER

I. Provisional Appointment (02/13/2006 – 01/31/2008)
Aria Anvar, M.D., Family Practice-Hospitalist (Includes PCCC)
Rodolfo R. Batarse, M.D., Internal Medicine/Nephrology
Yoo Jin T. Chong, M.D., Internal Medicine
Gordon C. Hunt, M.D., Gastroenterology
Sonali S. Master, M.D., Gastroenterology
Monique C. Mathews, M.D., Anesthesiology
Vakas A. Sial, M.D., Internal Medicine-Hospitalist (Includes PCCC)

- II. Reinstatement to Consulting Status from Leave of Absence
  Mary A. Rose, M.D., Radiation Oncology (02/13/2006 12/31/2006)
- III. Advancement from Provisional to Active Category
  James B. Esther, M.D., Diagnostic Radiology (02/13/2006 07/31/2007)
  Stefan Moldovan, M.D., General Surgery (02/13/2006 05/31/2006)
- IV. Advancement from Provisional to Courtesy Category Brett C. Meyer, M.D., Neurology (02/13/2006 – 12/31/2007)
- V. Advancement from Provisional to Associate Category
   Donald S. Herip, M.D., Occupational Medicine (02/13/2006 04/30/2007)
   Philip E. Larkins, D.P.M., Podiatry (02/13/2006 08/31/2006) (Includes PCCC)
- VI. Additional Privileges

  Kevin M. Deitel, M.D., Orthopaedic Surgery

   General Orthopaedic Trauma Bundle

Edward G. Greer, Jr., M.D., General Vascular Surgery

Insertion of Vagal Nerve Stimulator

Robert D. Trifunovic, M.D., Obstetrics and Gynecology

- Management of Patient Controlled Analgesia (PCA)
- VII. <u>Leave of Absence</u> Bob E. Blake, M.D., Emergency Medicine (02/13/2006 – 01/31/2008)

PALOMAR MEDICAL CENTER

555 East Valley Parkway Escondido, CA 92025 Tel 760.739.3140 Fax 760.739.2926 POMERADO HOSPITAL

15615 Pomerado Road Poway, CA 92064 Tel 858.613.4664 Fax 858.613.4217 ESCONDIDO SURGERY CENTER

343 East Second Avenue Escondido, CA 92025 Tel 760.480.6606 Fax 760.480.1288

PALOMAR POMERADO HEALTH

#### VIII. Voluntary Resignations/Withdrawal of Membership

Ricardo J. Moreno-Cabral, M.D., Cardiothoracic Surgery (Effective 01/17/2006)

Sunah A. Feng, M.D., Diagnostic Radiology (Effective 02/13/2006)

Scott H. Meyer, M.D., Neurosurgery (Effective 01/31/2006)

Juergen G. Winkler, M.D., Family Practice (Effective 12/20/2005) (Includes PCCC)

## IX. Allied Health Professional Resignations/Withdrawals

Pamela S. Christman, CNM, Certified Nurse Midwife (Effective 01/01/2006) Anna M. Lorenz, CNM, Certified Nurse Midwife (Effective 12/20/2005) Kristin D. Sohn, NNP, Neonatal Nurse Practitioner (Effective 10/13/2005)

Julie M. Walch-Michnowicz, N.P., Nurse Practitioner (Includes PCCC) (Effective 12/30/2005)

## X. Reappointments Effective 03/01/2006 - 02/29/2008

| Reuppomention Enterty of our | <u> </u>                | the state of the s |           |
|------------------------------|-------------------------|--|-----------|
| Robert W. Barr, M.D.         | Pediatrics              | Dept of Pediatrics   | Courtesy  |
| Dereck J. DeLeon, M.D.       | Family/General Practice | Dept of Family Practice  | Active    |
| David J. Golembeski, M.D.    | Neonatology             | Dept of Pediatrics   | Active    |
| David A. Haffie, D.O.        | Family Practice         | Dept of Family Practice  | Associate |
| (Change from Active to A     | Associate Category)     |  | *.        |
| Paul J. Haydu, M.D.          | Wound Care              | Dept of Emergency Medicine   | Courtesy  |
| Larry S. Johnsgard, M.D.     | Neonatology             | Dept of Pediatrics   | Active    |
| Richard G. Just, M.D.        | Hematology/Oncology     | Dept of Medicine   | Active    |
| George F. Longstreth, M.D.   | Gastroenterology        | Dept of Medicine   | Courtesy  |
| Jodi L. Sheridan, M.D.       | Family/General Practice | Dept of Family Practice  | Courtesy  |
| James M. Stansbury, M.D.     | Family/General Practice | Dept of Family Practice  | Active    |
| (Includes PCCC)              |                         |  |           |
| Theodore A. Wassel, D.D.S.   | Maxillofacial Surgery   | Dept of Surgery  | Associate |
|                              |                         |  |           |

## XI. Allied Health Professional Reappointment

Terrie J. Harrell, N.P., Nurse Practitioner; Sponsors: Drs. Arambulo, Heikoff, Nyberg, Runnman, Joseph, Simon, Howell, LaFond, Birnbaum, Han. (Includes PCCC) (Effective 03/01/2006 – 02/29/2008)

Barbara Lavin, N.N.P., Neonatal Nurse Practitioner; Sponsors: Drs. Fatayerji, Golembeski, Johnsgard, Segall; (Effective 02/13/2006 – 01/31/2008)

Jim P. Marte, P.A.-C., Physician Assistant; Sponsor: Dr. Schiffman; (Effective 03/01/2006 – 02/29/2008)

Pamela S. Vik, N.N.P., Neonatal Nurse Practitioner; Sponsors: Drs. Fatayerji, Golembeski, Johnsgard, Segall; (Effective 02/13/2006 – 01/31/2008)

#### Certification by and Recommendation of Chief of Staff:

As Chief of Staff of Palomar Medical Center, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment or alteration of staff membership or the granting of privileges and that the policy of the Palomar Pomerado Health System's Board of Directors regarding such practices have been properly followed. I recommend that the action requested in each case be taken by the Board of Directors.

# PERSONAL INFORMATION

| Provider Name & Title | Aria Anvar, M.D.   |
|-----------------------|--|
| PPHS Facilities       | Pomerado Hospital (Villa Pomerado) Palomar Medical Center (Palomar Continuing Care Center) |

# SPECIALTIES/BOARD CERTIFICATION

|             |   | _ |
|-------------|---|---|
|             | I TO THE STATE OF | 1 |
| G 1.141     | Family Practice - Not Board Certified   |   |
| Specialties | I Minity I 140000   |   |

# ORGANIZATIONAL NAME

|      | Neighborhood Healthcare |
|------|-------------------------|
| 1 27 | Neighborhood Healthcare |
| Name | TVOIS MOOTING OF A 200  |
| A 1  |                         |

| Medical Education Information   | University of Toronto, MD<br>FROM: 09/01/1993 TO: 06/20/1997<br>Doctor of Medicine Degree   |
|---------------------------------|---|
| Internship Information          | University of British Columbia Family Practice From: 07/01/1997 To: 06/30/1998  |
| Residency Information           | University of British Columbia Family Practice From: 07/01/1998 To: 06/30/1999  |
| Fellowship Information          | N/A   |
| Current Affiliation Information | Memorial Medical Center, Modesto, CA Royal Jubilee Hospital, Victoria, Canada Vancouver Island Health Authority, Victoria, Canada |

## PERSONAL INFORMATION

| Provider Name & Title | Rodolfo R. Batarse, M.D. |  |
|-----------------------|--------------------------|--|
| PPHS Facilities       | Pomerado Hospital        |  |
|                       | Palomar Medical Center   |  |

## SPECIALTIES/BOARD CERTIFICATION

|             |                                    |  | - |
|-------------|------------------------------------|--|---|
| Specialties | Internal Medicine - Certified 2002 |  |   |
|             | Nephrology - Not Board Certified   |  |   |

## **ORGANIZATIONAL NAME**

| _   |      |                              | <br> |
|-----|------|------------------------------|------|
| Г   | Nama | Rodolfo R. Batarse, M.D.     | 1    |
| - 1 | Name | 11000110 111 20111120, 11111 | <br> |

| Medical Education Information   | UCSD School of Medicine<br>FROM: 09/18/1995 TO: 06/06/1999<br>Doctor of Medicine Degree                            |
|---------------------------------|--|
| Internship Information          | University of California, San Diego Internal Medicine From: 06/24/1999 To: 06/27/2000 Internal Medicine Internship |
| Residency Information           | University of California, San Diego Internal Medicine From: 07/01/2000 To: 06/30/2002 Internal Medicine Residency  |
| Fellowship Information          | University of California, San Diego Nephrology From: 07/01/2003 To: 06/30/2005                                     |
| Current Affiliation Information | University of California, San Diego  |

# PERSONAL INFORMATION

| Provider Name & Title | Yoo Jin T. Chong, M.D. |  |
|-----------------------|------------------------|--|
| PPHS Facilities       | Pomerado Hospital      |  |
| 777107 4000000        | Palomar Medical Center |  |

# SPECIALTIES/BOARD CERTIFICATION

|                      | Internal Medicine - Certified 1996 | the state of the s |
|----------------------|------------------------------------|--|
|                      | T 1 Madiaina Carbtad IUUh          |  |
|                      | Internal Medicine - Certified 1990 |  |
| Sn <i>ocialtie</i> s | Internal Modiente                  |  |
|                      |                                    |  |

# ORGANIZATIONAL NAME

|        | Well Being Medical Clinic/Neighborhood Healthcare     |
|--------|---|
|        | 1 377-11 Doing Medical Clinic/Netohbothood Healthcalc |
| 37     | Well Bellig Medical Climo Telghoomed 220              |
| l Name |   |

| Medical Education Information   | University of Southern California, MD<br>FROM: 09/01/1989 TO: 05/07/1993<br>Doctor of Medicine Degree |
|---------------------------------|---|
| Internship Information          | N/A   |
| Residency Information           | Virginia Mason Medical Center Internal Medicine From: 06/24/1993 To: 06/23/1996                       |
| Fellowship Information          | N/A   |
| Current Affiliation Information | None  |



# PERSONAL INFORMATION

| Provider Name & Title | Robert F. Hempton, M.D. |  |  |
|-----------------------|-------------------------|--|--|
| PPHS Facilities       | Pomerado Hospital       |  |  |

# SPECIALTIES/BOARD CERTIFICATION

|              | 1 0 1 1 0 0 10 11000                 |
|--------------|--------------------------------------|
| Cn acialtica | Orthopaedic Surgery – Certified 1980 |
| Specialties  | Of moraculo burgory Continua 1900    |
|              |                                      |

# **ORGANIZATIONAL NAME**

| ·    |                    | <br> |  |
|------|--------------------|------|--|
| 37   | Kaiser Permanente  |      |  |
| Name | Kaisei i cimanente | <br> |  |

| Medical Education Information   | Yale University School of Medicine, New Haven, CT<br>FROM: 09/09/1970 TO: 05/20/1974<br>Doctor of Medicine Degree |  |
|---------------------------------|---|--|
| Internship Information          | Dartmouth-Hitchcock Medical Center, Lebanon, NH General Surgery From: 06/26/1974 To: 06/26/1975                   |  |
| Residency Information           | Yale New Haven Hospital, CT Orthopaedics From: 07/01/1975 To: 06/30/1978  |  |
| Fellowship Information          | Hartford Hospital, Hartford, CT Orthopaedics, Hand From: 07/01/1978 To: 12/31/1978                                |  |
| Current Affiliation Information | Sharp Coronado Hospital Kaiser Permanente, San Diego  |  |

# PERSONAL INFORMATION

| Provider Name & Title | Gordon C. Hunt, M.D.   |  |
|-----------------------|------------------------|--|
| PPHS Facilities       | Palomar Medical Center |  |

# SPECIALTIES/BOARD CERTIFICATION

|                   | Gastroenterology - Certified 2001  | I |
|-------------------|------------------------------------|---|
| <i>Specialics</i> | Internal Medicine – Certified 1998 | į |

# ORGANIZATIONAL NAME

|        | The state of the s |                                       |
|--------|--|---------------------------------------|
|        |  | · · · · · · · · · · · · · · · · · · · |
| Name   | Kaiser Permanente  |                                       |
| I Name |  |                                       |

| Medical Education Information   | Medical College of Pennsylvania, Philadelphia<br>FROM: 08/01/1991 TO: 05/13/1995<br>Doctor of Medicine Degree                    |  |
|---------------------------------|--|--|
| Internship Information          | N/A  |  |
| Residency Information           | University of California, Davis Internal Medicine From: 06/25/1995 To: 06/30/1998  |  |
| Fellowship Information          | Oregon Health Sciences University, Portland Gastroenterology From: 07/01/1998 To: 06/30/2001                                     |  |
|                                 | Oregon Health Sciences University, Portland Gastroenterology From: 07/01/2001 To: 06/30/2002 Advanced Endoscopic Ultrasonography |  |
| Current Affiliation Information | Kaiser Permanente, San Diego   |  |

# PERSONAL INFORMATION

| Provider Name & Title | Sonali S. Master, M. D.  |  |
|-----------------------|--------------------------|--|
| PPHS Facilities       | Escondido Surgery Center |  |
|                       | Palomar Medical Center   |  |

# SPECIALTIES/BOARD CERTIFICATION

| Specialties | Gastroenterology - Certified 2002  |  |
|-------------|------------------------------------|--|
|             | Internal Medicine - Certified 1999 |  |

# **ORGANIZATIONAL NAME**

|        | and the second s |                        |      | <br> |   |
|--------|--|------------------------|------|------|---|
|        |  | 77 ' 15                |      |      | 4 |
| Nan    | 10   | Kaiser Permanente      |      |      | 1 |
| 414411 | ••   | 1102001 1 011110110110 | <br> |      |   |

| Medical Education Information   | Northwestern University Medical School, Chicago, IL<br>FROM: 08/01/1992 TO: 05/31/1996<br>Doctor of Medicine Degree |
|---------------------------------|---|
| Internship Information          | N/A   |
| Residency Information           | Northwestern University Internal Medicine From: 06/18/1996 To: 06/28/1999   |
| Fellowship Information          | University of California, San Diego Gastroenterology From: 07/01/1999 To: 06/30/2002                                |
| Current Affiliation Information | Kaiser Permanente, San Diego  |

# PERSONAL INFORMATION

| Provider Name & Title | Monique C. Mathews, M.D.  |  |
|-----------------------|---|--|
| PPHS Facilities       | Escondido Surgery Center<br>Pomerado Hospital<br>Palomar Medical Center |  |

# SPECIALTIES/BOARD CERTIFICATION

| ľ | Specialties | Anesthesiology - Certified 2003 |
|---|-------------|---------------------------------|

# **ORGANIZATIONAL NAME**

| 1 1 0 1                              |  |
|--------------------------------------|--|
| Name Anesthesia Consultants of CA    |  |
| Name Allesticista Constitutio 51 51- |  |

| Medical Education Information   | University of Nebraska Medical Center, Omaha<br>FROM: 08/22/1994 TO: 05/09/1998                  |  |  |
|---------------------------------|--|--|--|
| Internship Information          | Creighton University Medical Center, Omaha, NB Internal Medicine From: 07/01/1998 To: 06/30/1999 |  |  |
| Residency Information           | University of Nebraska Anesthesia From: 07/01/1999 To: 06/30/2002                                |  |  |
| Fellowship Information          | N/A  |  |  |
| Current Affiliation Information | University of Nebraska<br>Boys Town National Research Hospital, Omaha, NB                        |  |  |

# PERSONAL INFORMATION

| Provider Name & Title | Shannon M. Rose, M.D. |  |
|-----------------------|-----------------------|--|
| PPHS Facilities       | Pomerado Hospital     |  |

# SPECIALTIES/BOARD CERTIFICATION

|   |             |                                    | <br> | <br> |
|---|-------------|------------------------------------|------|------|
|   | Specialties | Internal Medicine - Certified 2000 |      |      |
| - |             | Pediatrics – Certified 2000        | <br> |      |

## **ORGANIZATIONAL NAME**

|      | NY 11 1 - 1 TT-14       |  |
|------|-------------------------|--|
| Nama | Neighborhood Healthcare |  |
| Name | 110181100111000         |  |
|      |                         |  |

| Medical Education Information   | Loyola University, Illinois, Maywood FROM: 06/01/1988 TO: 06/13/1992   |
|---------------------------------|--|
| Internship Information          | Harbor/UCLA Medical Center Family Practice From: 06/24/1992 To: 06/23/1993   |
| Residency Information           | University of Minnesota, Minneapolis Medicine/Pediatrics From: 06/12/1996 To: 06/30/2000 Combined Medicine-Pediatric Residency |
| Fellowship Information          | N/A  |
| Current Affiliation Information | Palomar Medical Center   |

# PERSONAL INFORMATION

| Provider Name & Title | Vakas A. Sial, M.D.  | · .        |  |
|-----------------------|--|------------|--|
| PPHS Facilities       | Pomerado Hospital Palomar Medical Center (Palomar Continuing Car | re Center) |  |

# SPECIALTIES/BOARD CERTIFICATION

|             | Internal Medicine - Not Board Certif |  |
|-------------|--------------------------------------|--|
|             |                                      |  |
|             |                                      |  |
| Specialties |                                      |  |
|             |                                      |  |
|             |                                      |  |

#### ORGANIZATIONAL NAME

| _          | LAT 1.11 - June of III collaborate | · · · · · · · · · · · · · · · · · · · |
|------------|------------------------------------|---------------------------------------|
| 1 27       | Neighborhood Healthcare            |                                       |
| Nam        | 11CIENDOINGCG IIUMIAAA             |                                       |
| 7 4 60 110 |                                    |                                       |

| Medical Education Information   | Ross University School of Medicine, Edison, NJ<br>FROM: 04/01/1993 TO: 06/07/1997                      |  |  |
|---------------------------------|--|--|--|
| Internship Information          | West Virginia University Hospitals, Morgantown<br>Internal Medicine<br>From: 07/01/1997 To: 06/30/1998 |  |  |
| Residency Information           | West Virginia University Hospitals Internal Medicine From: 07/01/1998 To: 06/30/2000                   |  |  |
| Fellowship Information          | N/A  |  |  |
| Current Affiliation Information | N/A  |  |  |

#### PALOMAR POMERADO HEALTH ALLIED HEALTH PROFESSIONAL **APPOINTMENTS FOR FEBRUARY 2006**

NAME:

David L. Dubnicka, O.T.

SPECIALTY:

Orthopaedic Technician

SERVICES:

Orthopaedic Technician for the Kaiser Orthopaedic Surgeons at

Pomerado Hospital

TRAINING:

Grossmont College, La Mesa, CA

A.S. degree Orthopaedic Technology

PRACTICE:

Orthopaedic Technician, Kaiser Permanente, San Diego, CA

Orthopaedic Technician, Kaiser Permanente, Fontana, CA

SPONSORS:

Kaiser Orthopaedic Surgeons at Pomerado Hospital

**CERTIFICATION:** 

None

FACILITY:

Pomerado Hospital

NAME:

Jacqueline Ingle, R.N.

SPECIALTY: SERVICES:

Registered Nurse/Clinical Research Coordinator Registered Nurse for Clinical Research Studies for

Roger Schechter, M.D.

TRAINING:

Palomar College, San Marcos, CA

Associate of Arts Degree in Nursing

PRACTICE:

Registered Nurse Clinical Research Study Coordinator

for Roger Schechter, M.D.

Registered Nurse, Pomerado Hospital, Poway CA

Registered Nurse, Scripps Memorial Hospital, La Jolla, CA

Health Care Assistant, Palomar Medical Center, Escondido, CA

SPONSORS:

Roger Schechter, M.D.,

CERTIFICATION:

**FACILITIES:** 

None Pomerado Hospital

NAME:

Diane G. Lewis, N.P.

SPECIALTY:

**Nurse Practitioner** 

SERVICES:

PRACTICE:

Nurse Practitioner for Kaiser Orthopaedic Surgeons San Diego State University, San Diego, CA

TRAINING:

Bachelor of Science - Nursing

California State University, Long Beach, CA

Master of Science in Nursing including Acute Care Nurse Practitioner,

Clinical Nurse Specialist and Family Nurse Practitioner

Nurse Practitioner, Dept of Orthopaedics, Kaiser Permanente,

San Diego, CA

Clinical Care Nurse, Trauma Clinic Coordinator, UCSD Medical

Center, San Diego, CA

SPONSORS: CERTIFICATION:

Kaiser Orthopaedic Surgeons at Pomerado Hospital

FACILITY:

Pomerado Hospital

American Academy of Nurse Practitioners 2003

08/24/87-06/05/90

06/01/88-06/01/90

09/01/99-12/01/01

11/01/05-Present

01/06/03-Present

01/07/02-01/06/03

09/05/00-12/31/00

09/01/80-05/30/84

08/22/95-05/30/97

08/17/98-Present

08/06/84-11/04/98

06/01/90-Present

## PALOMAR POMERADO HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENTS

FOR FEBRUARY 2006 (continued)

Page two

NAME: SPECIALTY: Gary L. Meyer, P.A.-C.

SERVICES:

Physician Assistant Physician Assistant

TRAINING:

State University of New York – Stony Brook

В

Bachelor of Science/Physician Assistant Certificate
Physician Assistant, P.A. Surgical Services, La Mesa, CA

08/01/05-Present 10/01/04-08/01/05

07/01/02-06/30/04

PRACTICE:

Physician Assistant, Anthony Sanzone, M.D., Chula Vista, CA Kevin Yoo, M.D.

SPONSOR: CERTIFICATION:

National Commission on Certification of Physician Assistants

2004

FACILITY:

Pomerado Hospital

NAME:

Kristin M. Tyner, O.T. Orthopaedic Technician

SPECIALTY: SERVICES:

Orthopaedic Technician for the Kaiser Orthopaedic Surgeons at

Pomerado Hospital

TRAINING:

Grossmont College/ROP Program, San Diego, CA

Orthopedic Technician certificate (08/03/89)

08/22/88-12/19/00 05/17/99-Present

PRACTICE:

Orthopaedic Technician, Kaiser Permanente, San Diego, CA

Orthopaedic Physician Assistant, William Shoemaker, D.O.,

San Diego, CA

09/01/98-03/31/99

Orthopaedic Physician Assistant, Willam Tontz, M.D., San Diego, CA 06/01/98-09/30/98

Orthopaedic Technologist, American Orthopaedic/Sports Medicine,

Encinitas, CA

01/01/96-06/30/98

Orthopaedic Physician Assistant, Gary Kelman, M.D., San Diego, CA

09/01/94-12/31/95

01/01/88-09/30/94

Orthopaedic Technologist, Orthopaedic Multispeciality Group,

San Diego, CA Kaiser Orthopaedic Surgeons at Pomerado Hospital

SPONSORS:

None

CERTIFICATION: FACILITY:

Pomerado Hospital

NAME:

Tara L. Willnard, M.S.

SPECIALTY:

Audiology/Evoked Potential Technician

SERVICES:

Evoked Potential Technician/Intraoperative Monitoring

TRAINING:

Southwest Texas State University, San Marcos TX Bachelor of Science in Communicative Disorders

9/01/00-05/12/01

Lamar University, Beaumont, TX

Master of Science in Audiology

8/22/01-08/16/03

PRACTICE:

Intraoperative Monitoring Specialist, Neurodynamics, Inc., San Diego, CA

04/01/05-Present

Audiologist, Hearing Balance Centers, Hurst, TX

08/01/04-03/31/05 09/19/03-07/22/04

Audiologist, Balance Institute of San Diego, San Diego, CA

SPONSORS:

Thomas Marcisz, M.D., Mark Stern, M.D., Vrijesh Tantuwaya, M.D., Kevin Yoo, M.D.,

**CERTIFICATION:** 

American Speech-Language Hearing Association

2004

FACILITIES:

Pomerado Hospital



The Medical Staff
Palomar Medical Center
555 East Valley Parkway
Escondido, CA 92025

January 24, 2006

TO:

**Board of Directors** 

**BOARD MEETING DATE:** 

February 13, 2006

FROM:

Robert Trifunovic, M.D., Chief of Staff PMC Medical Staff Executive Committee

SUBJECT:

Additional Medical Staff Credentialing Recommendation

#### PALOMAR MEDICAL CENTER

The reappointment of Patrick M. O'Meara, M.D. will expire on 02/28/2006. As you will recall, the Board of Directors granted a limited reappointment from 05/01/2005 - 07/31/2005. The reappointment was then extended one month through 08/31/2005 and at the August 15, 2005 meeting of the Board of Directors an additional six month reappointment was granted through 02/28/2006.

The Executive Committee, in its meeting of January 23, 2006, reaffirmed its original recommendation for a two year reappointment for Dr. O'Meara through 04/30/2007. This expiration date is in accordance with Article 5.1.3 of the Medical Staff Bylaws which states that reappointments shall not exceed two years and will terminate based on the renewal date of the California medical license.

I. Reappointment Effective 03/01/2006 – 04/30/2007
Patrick M. O'Meara, M.D. Orthopaedic Surgery

Dept of Ortho/Rehab

Active

## Certification by and Recommendation of Chief of Staff:

As Chief of Staff of Palomar Medical Center, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment or alteration of staff membership or the granting of privileges and that the policy of the Palomar Pomerado Health System's Board of Directors regarding such practices have been properly followed. I recommend that the action requested in each case be taken by the Board of Directors.

# MEDICAL STAFF SERVICES

DATE:

January 24, 3006

MEMO TO:

Palomar Pomerado Health

**Board of Directors** 

FROM:

Marvin Levenson, M.D.

Medical Director, Escondido Surgery Center

RE:

**Medical Staff Recommendations** 

The Medical Staff of Palomar Medical Center approved the following credentialing recommendations for Escondido Surgery Center for submission to the Board of Directors:

**Appointment:** 

- ♦ Sonali S. Master, M.D., Gastroenterology (02/13/2006 01/31/2008)
- ♦ Monique C. Mathews, M.D., Anesthesiology (02/13/2006 − 01/31/2008)

Voluntary Resignations/Withdrawals:

♦ Kevin M. Deitel, M.D., Orthopaedic Surgery

Reappointment:

02/13/2006 - 08/31/2006

- ♦ Philip E. Larkins, D.P.M., Podiatry
- 02/13/2006 05/31/2006
- ♦ Stefan Moldovan, M.D., General Surgery

03/01/2006 - 02/29/2008

- ♦ James M. Stansbury, M.D., Family Practice
- Theodore A. Wassel, D.D.S., Maxillofacial Surgery

Allied Health Professional Reappointment:

03/01/2006 - 02/29/2008

♦ Jim P. Marte, P.A.-C., Physician Assistant; Sponsor: Dr. J. Schiffman

Certification by and Recommendation of Escondido Surgery Center Medical Director:

As Medical Director of Escondido Surgery Center, I certify that the procedures described in the Escondido Surgery Center Policies and Procedures for appointment, reappointment or the granting of privileges and that the policy of the Palomar Pomerado Health Board of Directors regarding such practices have been properly followed. I recommend that the action requested in each case be taken by the Board of Directors.

PALOMAR MEDICAL CENTER

555 East Valley Parkway Escondido, CA 92025 Tel 760.739.3140 Fax 760.739.2926 POMERADO HOSPITAL

15615 Pomerado Road Poway, CA 92064 Tel 858.613.4664 Fax 858.613.4217 ESCONDIDO SURGERY CENTER

343 East Second Avenue Escondido, CA 92025 Tel 760.480.6606 Fax 760.480.1288



PALOMAR

POMERADO H E A L T H



#### Pomerado Hospital Medical Staff Services

15615 Pomerado Road Poway, CA 92064 Phone – (858) 613-4664 FAX – (858) 613-4217

DATE:

February 1, 2006

TO:

Board of Directors - February 13, 2006 Meeting

FROM:

Paul E. Tornambe, M.D., Chief of Staff, Pomerado Hospital Medical Staff

SUBJECT:

Medical Staff Credentials Recommendations - January 2006:

Provisional Appointments: (02/13/2006 - 01/31/2008)

Aria Anvar, M.D. – Family Practice Rodolfo R. Batarse, M.D.- Nephrology

Yoo Jin T.Chong, M.D. – Internal Medicine

Robert F. Hempton, M.D. - Orthopedic Surgery

Monique Mathews, M.D. - Anesthesia

Shannon M. Rose, M.D. - Internal Medicine

Vakas A. Sial, M.D. - Internal Medicine

#### Biennial Reappointments:

Michael J. Barker, M.D. - Active - Medicine (03/01/2006 - 02/28/2008)

Robert W. Barr, M.D. - Active - Pediatrics (03/01/2006 - 02/28/2008)

Helen Y. Chang, M.D. - Active - OB/GYN (03/01/2006 - 02/28/2008)

Matthew J. Curtis, M.D. - Active - Surgery (03/01/2006 - 08/31/2007)

David J. Golembeski, M.D. - Active - Pediatrics (03/01/2006 - 02/28/2008)

David A. Haffie, M.D. - Affiliate - Medicine (03/01/2006 - 02/28/2008)

Paul J. Haydu, M.D. - Active - Wound Care (03/01/2006 - 02/28/2008)

Larry S. Johnsgard, M.D. - Active - Pediatrics (03/01/2006 - 02/28/2008)

Richard G. Just, M.D. - Active - Medicine (03/01/2006 - 02/28/2008)

Kenneth R. Roth, M.D. - Assisting Only - Surgery (02/13/2006-10/31/2007)

#### Change in Category:

Howard N. Kaye, M.D. - Consulting to Affiliate

Arvin L. Mirow, M.D. - Affiliate to Courtesy

#### Advancements:

Munish K. Batra, M.D. Plastic Surgery - Courtesy

James B. Esther, M.D. - Radiology - Active

Mark Gipsman, M.D. - Anesthesia - Active

Donald S. Herip, M.D. - Medicine - Active

Chenggang Hu, M.D. - Anesthesia - Active

Ronald Levin, M.D. - Anesthesia - Active

Malini Reddy, M.D. - Anesthesia - Active

## Allied Health Reappointments: 03/01/2006 - 02/28/2008

Terrie J. Harrell, N.P. - Sponsors - Kaiser Physicians

Barbara J. Lavin, N.N.P. - Sponsors - Neonatologists

Pamela S. Vik, N.N.P. - Sponsors - Neonatologists

## Allied Health Appointments: (02/13/2006 - 01/31/2008)

David L. Dubnicka, O.T. - Sponsors Kaiser Physicians

Jacqueline A. Ingle, R.N. - Sponsor - Roger Schechter, M.D.

Diane G. Lewis, RN, NP - Sponsors Kaiser Physicians

Pomerado Hospital – Credentials Memo February 1, 2006 - Page 2

Gary L. Meyer, P.A.-C – Sponsor Kevin Yoo, M.D. Kristen M. Tyner, O.T. – Sponsors Kaiser Physicians Tara L. Willnerd – Audiologist- Sponsor – Dr. Yoo

<u>Leave of Absence 02/13/06 – 02/12/08</u> Bob E. Blake, M.D.- Emergency Medicine

<u>Voluntary Resignations/Withdrawal of Membership:</u> Sunah A. Feng, M.D. - Radiology Jonathan T. Lu, M.D. - Internal Medicine Samuel H. Wood, M.D. - OB/GYN

Allied Health Resignation: Linda Beckwith, M.A. Kristin D. Sohn, N.N.P.

POMERADO HOSPITAL

<u>Certification by and Recommendation of Chief of Staff</u>: As Chief of Staff of Pomerado Hospital, I certify that the procedures described in the Medical Staff Bylaws

<u>Certification by and Recommendation of Chief of Staff</u>: As Chief of Staff of Pomerado Hospital, I certify that the procedures described in the Medical Staff Bylaws

for appointment, reappointment, or alternation of staff membership or the granting of privileges and the policy of the Palomar Pomerado Health System's Board of

Directors regarding such practices have been properly followed. I recommend that the Board of Directors take the action requested in each case.



## Pomerado Hospital Medical Staff Services

15615 Pomerado Road Poway, CA 92064 Phone – (858) 613-4664 FAX – (858) 613-4217

DATE:

February 1, 2006

TO:

Board of Directors - February 13, 2006 Meeting

FROM:

Paul E. Tornambe, M.D., Chief of Staff, Pomerado Hospital Medical Staff

SUBJECT:

Amendment to Pomerado Hospital Section of OB/GYN Rules and Regulations

The following amendments to the Pomerado Hospital OB/GYN Rules and Regulations were approved by the Executive Committee for forwarding to the Board of Directors based on approval by vote of the Active Members of the Section of OB/GYN. This was a recommendation from the Voluntary Review of Quality of Care (ACOG) site visit of June 2-3, 2005.

# XVI. RULES REGARDING SURGERY, <u>SURGICAL ASSISTANTS FOR CESAREAN SECTIONS</u>, AND SPECIFIED PROFESSIONAL PERSONNEL STAFF

- A. Members of the Department shall adhere to the rules outlined by the Department of Surgery Rules and Regulations, ARTICLE XV.
- B. Use of Specified Professional Personnel Staff in the operating suite shall adhere to the guidelines set forth in the Medical Staff Bylaws, ARTICLE IV.
- C. A qualified surgical assistant must be present at the Pomerado Birthing Center for all cesarean section cases, the only exceptions being when the urgency to begin for severe fetal and/or maternal compromise is present. Under these circumstances, the primary surgeon obviously starts the case before the assistant arrives. This assistant can be a physician, a surgeon, or an RNFA with proper documentation of training and current ongoing experience.

# Annual Review & Approval of Amended and Restated Bylaws (2005) (amendment)

| TO:                  | Board of Directors  |
|----------------------|---|
| DATE:                | February 13, 2006   |
| FROM:                | Michael H. Covert, CEO  |
| ву:                  | Christine Meaney, Board Assistant<br>on behalf of Jim Neal, Director,<br>Corporate Compliance & Integrity   |
| BACKGROUND:          | Following annual review and approval of the PPH Amended and Restated Bylaws (2005) at the December 12, 2005 Board Meeting, the attached amended Bylaws dated February 13, 2006 are submitted due to a typographical error that was noticed in the December 12, 2005 version, both of which are included for reference.  |
|                      | The title of Chief Planning Officer should continue under Non-Voting Membership of the Strategic Planning Committee section of the Bylaws as originally approved in October 2004, instead of erroneously indicated as Chief Marketing and Communications Officer in the December 2005 version (page 10). The Bylaws dated February 13, 2006 as now submitted have been corrected to reflect this. |
|                      | A Board Resolution is attached.   |
| BUDGET IMPACT        | : None  |
| STAFF<br>RECOMMENDAT | ION: Board approval requested   |
| COMMITTEE QU         | ESTIONS:  |
| COMMITTEE RI         | CCOMMENDATION:  |
| Motion:              |   |

 $\mathbf{X}$ 

Individual Action:

Information:

Required Time:

# RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR POMERADO HEALTH FOR ADOPTION OF AMENDED AND RESTATED BYLAWS Resolution No. 02.13.06 (01) - 01

WHEREAS, Palomar Pomerado Health ("PPH") in accordance with an annual, comprehensive review of the District Bylaws which has been undertaken and following previous amendments to the Bylaws at meetings of the Board of Directors held January 13, 2003, February 10, 2003, May 12, 2003, and January 2004, October 18, 2004, and December 12, 2005 (the "Amendments"); and

WHEREAS, for ease in administering the Bylaws and in order to avoid confusion, PPH now desires to restate the Bylaws to incorporate the Amendments and adopt such restated Bylaws, a true and correct copy of which is attached hereto as Exhibit A (the "Amended and Restated Bylaws"). The December 12, 2005 version, attached as Exhibit B, indicates the typographical error of "Chief Marketing and Communications Officer" on page 10 under Strategic Planning Committee (Non-Voting Membership);

**NOW, THEREFORE, IT IS HEREBY RESOLVED** that the Amended and Restated Bylaws are hereby approved and adopted in the form of Exhibit A, attached hereto.

**PASSED AND ADOPTED** at a duly held meeting of the Board of Directors on February 13, 2006, by the following vote:

| AYES:                             |          |
|-----------------------------------|----------|
| NOES:                             |          |
| ABSTAINING:                       |          |
| ABSENT:                           |          |
| ATTESTED:                         |          |
| Marcelo R. Rivera, M.D., Chaîrman | <u> </u> |
|                                   |          |
| Linda C. Greer, R.N., Secretary   |          |

# AMENDED AND RESTATED BYLAWS

OF

### PALOMAR POMERADO HEALTH

#### BYLAWS OF PALOMAR POMERADO HEALTH

### ARTICLE I. <u>DEFINITIONS</u>

- 1.1 "Hospital(s)" means Palomar Medical Center, 555 East Valley Parkway, Escondido, California, and/or Pomerado Hospital, 15615 Pomerado Road, Poway, California.
- 1.2 "Board" means the Board of Directors of the District.
- 1.3 "District" means Palomar Pomerado Health.
- "Medical Staff(s)" or "Staff(s)" means the organized medical staff of Palomar Medical Center, the organized medical staff of Pomerado Hospital, and/or the organized medical staff of other District Facilities, as indicated.
- 1.5 "Facility" or "Facilities" means a Hospital or the Hospitals, Home Health, Skilled Nursing Facilities, or any other health care facility or facilities operated by the District.
- 1.6 "Practitioner" means a physician (i.e., M.D. or D.O.), dentist (D.D.S. or D.M.D.) or podiatrist (D.P.M.) who is duly licensed in the State of California to practice within the scope of said license.

# ARTICLE II. ORGANIZATION, POWERS AND PURPOSES

- 2.1 ORGANIZATION. The District is a political subdivision of the State of California organized under the Division 23 of the Health and Safety Code ("Local Health Care District Law").
- PURPOSES AND POWERS. The District is organized for the purposes described in the Local Health Care District Law and shall have and may exercise such powers in the furtherance of its purposes as are now or may hereafter be set forth in the Local Health Care District Law and any other applicable statutes, rules or regulations of the State of California.
- 2.3 BYLAWS, POLICIES AND PROCEDURES
  - The Board shall have the powers to adopt, amend, and promulgate District Bylaws, Policies, and Procedures as appropriate, and may delegate its power to promulgate Procedures in its discretion. For purposes of these Bylaws, "Policies" shall denote Board approved statements that provide broad strategic directions and/or governing mandates for the District, enabling the development of Procedures. The term "Procedures" shall mean any specific instruction or mode of conduct for the purpose of implementing a policy that may be promulgated by those District officers designated by the Board.
  - 2.3.2 The Board shall review and approve the District Bylaws annually.

- 2.3.3 The Governance Committee will have the responsibility to oversee and ensure collaboration between the Board and District management for the purpose of developing, reviewing and revising the District Bylaws, Policies, Procedures, and other rules or regulations prior to being brought to the full Board for approval.
- 2.4 DISSOLUTION. Any proposal to dissolve the District shall be subject to confirmation by the voters of the District in accordance with the Government Code.

### ARTICLE III. OFFICES

- 3.1 PRINCIPAL OFFICE. The principal office of the District is hereby fixed and located at 15255 Innovation Drive, San Diego, California.
- 3.2 OTHER OFFICES. Branch or subordinate offices may be established at any time by the Board at any place or places.

### ARTICLE IV. BOARD

- 4.1 GENERAL POWERS. The Board is the governing body of the District. All District powers shall be exercised by or under the direction of the Board. The Board is authorized to make appropriate delegations of its powers and authority to officers and employees.
- 4.2 OPERATION OF FACILITIES. The Board shall be responsible for the operation of the Facilities according to the best interests of the public health, and shall make and enforce all rules, regulations and bylaws necessary for the administration, government, protection and maintenance of the Facilities and all property belonging thereto, and may prescribe the terms upon which patients may be admitted to the Facilities. Such rules, regulations and bylaws applicable to the Facilities shall include but not be limited to the provisions specified in the Health and Safety Code, and shall be in accordance with and contain minimum standards no less than the rules and standards of private or voluntary hospitals. Unless specifically prohibited by law, the Board may adopt other rules which could be lawfully adopted by private or voluntary hospitals.
- 4.3 RATES. In setting the rates the Board shall, insofar as possible, establish such rates as will permit the Facilities to be operated upon a self-supporting basis. The Board may establish different rates for residents of the District than for persons who do not reside within the District.
- 4.4 NUMBER AND QUALIFICATION.
  - The Board shall consist of seven members, each of whom shall be a registered voter residing in the District.
  - Except as otherwise provided in applicable law, no Board member shall possess any ownership interest in any other hospital serving the same area as that served by the District or be a director, policymaking management employee, or medical staff officer of any hospital serving the same area as that served by the District, unless the boards of directors of the District and the hospital have determined that the situation will further joint planning, efficient delivery of health care services, and the best interests of the areas

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served by their respective hospitals, or unless the District and the hospital are affiliated under common ownership, lease, or any combination thereof. No Board member shall simultaneously hold any other position over which the Board exercises a supervisory, auditory, or removal power.

- For purposes of this section, a hospital shall be considered to serve the same area as the District if more than five percent of the hospital's patient admissions are District residents.
- For purposes of this section, the possession of an ownership interest, including stocks, bonds, or other securities by the spouse or minor children or any person shall be deemed to be the possession or interest of the person.
- Any candidate who elects to run for the office of member of the Board, and who owns stock in or who works for any health care facility that does not serve the same area served by the District, shall disclose on the ballot his or her occupation and place of employment.
- 4.5 CONFLICTS OF INTERESTS. The Board shall endeavor to eliminate from its decision making processes financial or other interests possessed by its members that conflict with the District's interests. Board members and other persons who are "Designated Employees," as defined in the current Conflict of Interests Code of Palomar Pomerado Health as it may be amended from time to time, shall at all times comply with said Code any and all laws and regulations relating to conflicts of interests, including but not limited to the Government Code.
- 4.6 ELECTION AND TERM OF OFFICE. An election shall be held in the District on the first Tuesday after the first Monday in November in each even-numbered year, at which a successor shall be chosen to each Director whose term shall expire on the first Friday of December following such election. The election of Board members shall be an election at large within the District and shall be consolidated with the statewide general election. The candidates receiving the highest number of votes for the offices to be filled at the election shall be elected thereto. The term of office of each elected Board member shall be four years, or until the Board member's successor is elected and has qualified, except as otherwise provided by law in the event of a vacancy.
- 4.7 NEW MEMBER ORIENTATION. An orientation shall be provided which familiarizes each new Board member with his or her duties and responsibilities, including the Board's responsibilities for quality care and the Facilities' quality assurance programs. Continuing education opportunities shall be made available to Board members.
- 4.8 EVALUATION. The Board shall evaluate its own performance as well as those of its officers and employees on an annual or other periodic basis.
- 4.9 VACANCIES. Vacancies on the Board shall be filled in accordance with the applicable provisions of the Government Code.
- 4.10 RESIGNATION OR REMOVAL. Any Board member may resign effective upon giving written notice to the Chairperson or the Secretary of the Board, unless the notice specifies a later time for the effectiveness of such resignation. The term of any member of the Board shall expire if the member is absent from three consecutive regularly scheduled monthly Board meetings or from three of any five

consecutive regular meetings of the Board and if the Board by resolution declares that a vacancy exists on the Board. All or any of the members of the Board may be recalled at any time by the voters following the recall procedure set forth in Division 16 of the Election Code.

- 4.11 LIABILITY INSURANCE. The Board may purchase and maintain liability insurance on behalf of any person who is or was a director, officer, employee or agent of the District, or is or was serving at the request of the District as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise or as a member of any committee or similar body, against any liability asserted against such person and incurred by him or her in any such capacity, or arising out of his or her status as such, whether or not the District would have the power to indemnify him or her against such liability.
- 4.12 COMPENSATION. The Board shall serve without compensation unless the Board authorizes, by resolution adopted by majority vote, compensation of not to exceed \$100 per meeting for a maximum of five meetings per month for each member of the Board. For purposes of this section, "meeting" shall mean any regular or special Board meeting, whether open or closed, any standing or ad hoc committee meetings or any orientation sessions. For compensation purposes, successive open and closed meetings shall be considered as one meeting.
- 4.13 HEALTH AND WELFARE BENEFITS. Notwithstanding Section 4.12 above, the Board may provide health and welfare benefits, pursuant to Government Code Section 53200 et seq., for the benefit of its elected and former members and their dependents, or permit its elected and former members and their dependents to participate in District programs for such benefits, in accordance with all applicable laws and regulations.
- 4.14 TRAVEL AND INCIDENTAL EXPENSES REIMBURSEMENT. Each member of the Board shall be reimbursed for his or her actual necessary traveling and incidental expenses incurred in the performance of official business of the District as approved by the Board and in accordance with District Policy. Such reimbursement, if approved by the Board, shall not constitute "compensation" for purposes of Section 4.12 above.

#### ARTICLE V. BOARD MEETINGS

- 5.1 MEETINGS OPEN TO THE PUBLIC. Meetings of the Board shall be open to the public, except as otherwise provided in applicable laws or regulations, including but not limited to the Brown Act and the Local Health Care District Law.
- BOARD MEETING. A meeting of the Board is any congregation of a majority of the members of the Board at the same time and place to hear, discuss or deliberate upon any item that is within the subject matter jurisdiction of the Board. A meeting is also the use of direct communication, personal intermediaries or technological devices that is employed by a majority of the members of the Board to develop a collective concurrence as to action to be made on an item by the members of the Board. Board meetings may be held by teleconference subject to applicable laws and regulations including the Government Code.
- 5.3 REGULAR MEETINGS. Regular meetings of the Board shall be held as follows:

- The Board's annual organizational meeting shall be held in December at the place and time designated by the Board in the Resolution discussed in Section 5.3.2 below.
- At the annual organizational meeting, the Board shall pass a resolution stating the dates, times and places of the Board's regular monthly meetings for the following calendar year.
- 5.4 HOLIDAYS. Meetings of the Board may be held on any calendar day as determined by the Board.
- 5.5 NOTICE AND ACTION. The Board shall provide public notice of its meetings in accordance with the Brown Act. No "action," as defined in the Brown Act, shall be taken on any item not appearing on the posted agenda unless permitted under applicable law.
- 5.6 MEMBERS OF THE PUBLIC. Members of the public shall be afforded an opportunity to participate in District decision making processes and Board meetings to the extent permitted under applicable laws, including but not limited to the Brown Act and the Local Health Care District Law.
- 5.7 ANNUAL ORGANIZATIONAL MEETING. At its annual organizational meeting, the Board shall organize by the election of officers. One member shall be elected as Chairperson, one as Vice Chairperson and one as Secretary. The Board may also appoint the Treasurer at the annual organizational meeting, who may also be the Chairperson of the Finance Committee.

#### 5.8 SPECIAL MEETINGS.

- A special meeting may be called at any time by the Chairperson, or by four or more Board members, by delivering personally or by mail written notice to each Board member and to each local newspaper of general circulation, radio or television station requesting notice in writing. Such notice must be delivered personally or by mail at least 24 hours before the time of such meeting as specified in the notice. The call and notice shall specify the time and place of the special meeting and the business to be transacted; no other business shall be considered at special meetings. Written notice may be dispensed with as to any Board member who at or prior to the time the meeting convenes files with the Secretary a written waiver of notice. Such written notice may also be dispensed with as to any member who is actually present at the meeting at the time it convenes.
- The call and notice shall also be posted at least 24 hours prior to the special meeting in a location that is freely accessible to members of the public. Notice shall be required pursuant to this Section regardless of whether any action is taken at the special meeting.
- In the case of an emergency situation involving matters upon which prompt action is necessary due to the disruption or threatened disruption of public facilities, the Board may hold an emergency meeting without complying with either or both the 24 hour notice or posting requirements. In the event the notice and/or posting requirements are dispensed with due to an emergency situation, each local newspaper of general circulation and radio or television station which has requested notice of special meetings shall be notified by the Chairperson, or his designee, one hour prior to the emergency meeting, by telephone. All telephone numbers provided in the most recent request of such newspaper or station for notification of special meetings shall be exhausted. In the event that telephone services are not functioning, the notice requirements of this

paragraph shall be deemed waived, and the Board, or its designee, shall notify those newspapers, radio stations or television stations of the fact of the holding of the emergency meeting, the purpose of the meeting, and any action taken at the meeting as soon after the meeting as possible. Notwithstanding this Section, the Board shall not meet in closed session during a meeting called as an emergency meeting. With the exception of the 24 hours notice and posting requirements, all requirements contained in this Section shall be applicable to any meeting called due to an emergency situation.

- The minutes of an emergency meeting, a list of persons who the Chairperson, or his designee, notified or attempted to notify, a copy of the roll call vote, and any actions taken at the meeting shall be publicly posted for a minimum of ten days as soon possible after the meeting.
- QUORUM. A vote is to be determined by a simple "majority vote". If there are abstentions on a vote, the non-abstaining members of the Board must constitute a quorum of the whole board (four members or more) for the transaction of business. Except as otherwise provided by law or these Bylaws, the act of the majority of the non-abstaining Board members voting will be the "majority vote".
- 5.10 ADJOURNMENT AND CONTINUANCE. The Board may adjourn any of its meetings in accordance with applicable laws, including but not limited to the Brown Act.
- DISRUPTED MEETINGS. In the event that any meeting is willfully interrupted by a group or groups of persons so as to render the orderly conduct of such meeting unfeasible, and order cannot be restored by the removal of individuals who were willfully interrupting the meeting, the Board may order the meeting room closed and continue in session. Only matters appearing on the agenda may be considered in such a session. Representatives of the press or other news media, except those participating in the disturbance, shall be allowed to attend any session held pursuant to this section. The Board may establish a procedure for readmitting an individual or individuals not responsible for willfully disrupting the orderly conduct of the meeting.
- MEDICAL STAFF REPRESENTATION. The Medical Staff of each Facility shall have the right of representation at all meetings of the Board, except closed sessions at which such representation is not requested, by and through the Chief of Staff or President of each Medical Staff, who shall have the right of attendance, the right to participate in Board discussions and deliberations, but who shall not have the right to vote.

# ARTICLE VI. BOARD COMMITTEES

- APPOINTMENT. Standing committees are established by the Board and shall be advisory in nature unless otherwise specifically authorized to act by the Board. Members of all committees, whether standing or special (ad hoc) shall be appointed by the Chairperson of the Board.
  - A standing committee of the Board is any commission, committee, board or other body, whether permanent or temporary, which is created by formal action of the Board and has continuing subject matter jurisdiction and/or a meeting schedule fixed by charter, ordinance, resolution, or formal action of the Board. Actions of committees shall be advisory in nature with recommendations being made to the full Board.

- Special or ad hoc committees are appointed by the Chair of the Board and shall exist for a single, limited purpose with no continuing subject matter or jurisdiction. Special or advisory committees shall be advisory in nature and shall make recommendation to the full Board. The committee shall be considered disbanded upon conclusion of the purpose for which it was appointed.
- 6.1.3 The Audit Committee of the Board shall function pursuant to a charter approved by the Board and amended from time to time.
- 6.2 STANDING COMMITTEES. There shall be the following standing committees of the Board: Finance, Governance, Human Resources, Strategic Planning, Community Relations, Quality Review, Audit Committee, and Facilities and Grounds Committee. Standing committees will be treated as the Board with respect to Article V of these bylaws. All provisions in Article V that apply to Board members shall apply to members of any standing committee.

#### 6.2.1 Finance Committee.

- (a) Voting Membership. The Finance Committee shall consist of seven voting members, four members of the Board, the President and Chief Executive Officer and the Chief of Medical Staff from each hospital. One alternate Committee member shall also be appointed by the Chairperson who shall attend Committee meetings and enjoy voting rights on the Committee only when serving as an alternate for a voting Committee member. The Chairperson of the Board may appoint the Treasurer as the chairperson of the Finance Committee.
- (b) <u>Non-Voting Membership</u>. The Chief Financial Officer (CFO), the Chief Administrative Officers Palomar Medical Center and Pomerado Hospital and a nurse representative.
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Review the preliminary, annual operating budgets for the District and Facilities and other entities;
  - (ii) Develop and recommend to the Board the final, annual, operating budgets;
  - (iii) Develop and recommend to the Board a three-year, capital expenditure plan that shall be updated at least annually. The capital expenditure plan shall include and identify anticipated sources of financing for and objectives of each proposed capital expenditure in excess of \$100,000;
  - (iv) Review and recommend approval of the monthly financial statements to the Board.
  - (v) Recommend to the Board cost containment measures and policies;

- (vi) Review annually those policies and procedures within its purview and report the results of such review to the Governance Committee. Such reports shall include recommendations regarding the modification of existing or creation of new policies and procedures; and
- (vii) Perform such other duties as may be assigned by the Board.

#### 6.2.2 Governance Committee.

- (a) <u>Voting Membership</u>. Membership shall consist of no more than three members of the Board and one alternate. The alternate shall attend and enjoy voting rights only in the absence of a voting Committee member.
- (b) <u>Non-Voting Membership</u>. The President and Chief Executive Officer and the Chief Marketing and Communications Officer.
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Review periodically and make recommendations regarding pending and existing federal, state and local legislation which, in the committee's opinion, may impact the District;
  - (ii) Make an annual, comprehensive review of the District bylaws, policies and procedures and receive reports regarding same, and elicit recommendations on such issues from management;
  - (iii) Review any initiation of legislation;
  - (iv) Review such other issues associated with PPH and/or Board governance and its effectiveness, including but not limited to Board member orientation and continuing education;
    - (v) Make recommendations regarding the annual self-assessment of the Board; and
    - (vi) Perform such other duties as may be assigned by the Board.

#### 6.2.3 Human Resources Committee.

- (a) Voting Membership. Membership shall consist of no more than three members of the Board and one alternate. The alternate shall attend Committee meetings and enjoy voting rights only in the absence of a voting Committee member.
- (b) Non-Voting Membership. The President and Chief Executive Officer, Chief Human Resources Officer, the Chief Administrative Officers Palomar Medical Center and Pomerado Hospital and the Chief Nurse Executive.
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:

- Make recommendations to the President and Chief Executive Officer and (i) the Board to improve communications among the Board, Medical Staffs, District employees and auxiliaries, including initiating special studies;
- Maintain ultimate oversight of annual performance reviews of all District (ii) officers and employees and, in the appropriate circumstances and upon request by the Board, make a report of such reviews to the Board; and
- Review annually those policies and procedures within its purview and (iii) report the results of such review to the Governance Committee. Such reports shall include recommendations to the Board regarding modification of existing or creation of new policies and procedures; and
- Review and make recommendations to the Board regarding compensation, incentive, and benefit plans offered to District Officers and other employees.
- Ensure that all special studies and recommendations/proposals are in (v) alignment with the PPH mission, vision and strategic plan as well as government regulations.
- Perform such other duties as may be assigned by the Board. (vi)

#### Strategic Planning Committee. 6.2.4

- Voting Membership. The Committee shall consist of seven voting members, (a) including four members of the Board and one alternate who shall attend Committee meetings and enjoy voting rights on the Committee only when serving as an alternate for a voting Committee member, the President and Chief Executive Officer and the Chiefs of Staff of the Hospitals or the designees of the Chiefs of staff, as approved by the Committee Chairperson.
- Non-Voting Membership. The Chief Financial Officer, Chief Planning Officer, (b) Chief Administrative Officers Palomar Medical Center and Pomerado Hospital, the Chief Nurse Executive, Chief Executive Officer of the Palomar Pomerado Health Foundation, a board member of the Palomar Pomerado Health Foundation recommended by the Foundation and approved by the Committee Chairperson and an additional physician from each hospital as recommended by each hospital's Chief of Staff and as approved by the Committee Chairperson.
- Duties. The duties of the Committee shall include but are not limited to: (c)

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Review and make recommendations to the Board regarding the District's (i) short and long range strategic plans, master and Facility plans, physician development plans and strategic collaborative relationships; and

- (ii) Review annually those policies within the Committee's purview and report the results of such review to the Governance Committee. Such reports shall include recommendations regarding the modification of existing, or creation of new policies; and
- (iii) Undertake planning regarding physician recruitment and retention and program development of new and enhanced services and Facilities; and
- (iv) Perform such other duties as may be assigned by the Board.

#### 6.2.5 Quality Review Committee.

- Voting Membership. The Committee shall consist of five voting members, including three members of the Board and the Chairs of Medical Staff Quality Management Committees of the Hospitals or Physician Co-Chair, Quality Council (voting position will rotate between Chairs of Medical Staff Quality Management Committees and Physician Co-Chair Quality Council allowing only two votes total for these three positions) and an alternate, who shall attend and enjoy voting rights only in the absence of a voting Committee Member.
- (b) Non-Voting Membership. The President and Chief Executive Officer, the Chief Administrators of Pomerado Hospital and Palomar Medical Center, a nurse representative, the Chief Quality and Clinical Effectiveness Officer, Chair of the Patient Safety Committee, the Physician Co-Chair of Quality Council or the Chairs of the Quality Management Committees of Pomerado Hospital and Palomar Medical Center (non-voting position will rotate between Chairs of Medical Staff Quality Management Committees, and Physician Co-Chair Quality Council allowing only two votes total for these three positions)
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Periodically review and make recommendations to the Board with regard to credentialing, claims and potential litigation, performance improvement and risk management activities, and performance improvement and procedure issues; and
  - (ii) Oversee the performance improvement and risk management activities of the Hospitals and other Facilities, if applicable, and shall periodically report its conclusions and recommendations to the Board.

#### 6.2.6 Community Relations Committee.

(a) Voting Membership. The Committee shall consist of five voting members, including three members of the Board and one alternate who shall attend Committee meetings and enjoy voting rights on the Committee only when serving as an alternate for a voting Committee member, the President and Chief Executive

Officer and a Board member of the Palomar Pomerado Heath Foundation recommended by the Foundation and approved by the Committee Chairperson.

- (b) Non-Voting Membership. The Chief Marketing and Communications Officer, the Community Outreach Director, the Chief Executive Officer of the Palomar Pomerado Health Foundation, the Director HealthSource, the Director Marketing and Public Relations, a nurse representative and a representative of each District Auxiliary, as approved by the Committee Chairperson.
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Review and make recommendations to the Board regarding the District's community relations and outreach activities, including marketing, community education and wellness activities;
  - (ii) Review marketing policies to ensure that they support the District's mission and goals. Such policies shall include market research, specific and marketing program planning and development, and internal and external communications. The Committee shall report its review of such policies to the Board on a regular basis;
  - (iii) Serve as Board liaison to the Foundation and annually review, recommend and prioritize capital projects and contemplated funding requests to the Foundation's Board of Directors, and review annual reports from the Foundation regarding donations and projects funded during the previous year;
  - (iv) Review annually those policies within the Committee's purview and report the results of such review to the Governance Committee. Such reports shall include recommendations regarding the modification of existing, or creation of new, policies;
  - (v) Advise the Board on issues relating to health care advisory councils and District grant procurements;
  - (vi) Undertake planning regarding the District's community relations and outreach activities, including marketing, community education and wellness activities; and
  - (vii) Perform such other duties as may be assigned by the Board.

#### 6.2.7 Audit Committee.

(a) <u>Voting Membership</u>. The Audit Committee shall consist of no more than three members of the Board and one alternate. The alternate shall attend Committee meetings and enjoy voting rights only in the absence of a voting Committee member.

- (b) Non-Voting Membership. The President and Chief Executive Officer, Director of Audit Services, and a representative from each Hospital's Medical Staff. Any district executive, representative or director will attend as an invited guest.
- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Approve the overall audit scope;
  - (ii) Ensuring that audits are conducted in an efficient and cost effective manner;
  - (iii) Overseeing the organizations financial statements and internal controls;
  - (iv) Recommending to the Board a qualified firm to conduct an annual, independent financial audit;
  - (v) Recommending to the Board the approval of the organizations annual audit reports;
  - (vi) Review annually those policies within its purview and report the results of such review to the Governance Committee. Such reports shall include recommendations regarding the modification of existing or creation of new policies; and
  - (vii) Assess and monitor the independent status of the outside independent auditors;
  - (viii) Direct special investigations for the Board;
  - (ix) Meet periodically in closed session with only committee members present.
  - (x) Perform such other duties as may be assigned by the Board.

#### 6.2.8 Facilities and Grounds Committee.

- (a) Voting Membership. The Facilities and Grounds Committee shall consist of four voting members, including three members of the Board, and the President and Chief Executive Officer. One alternate Committee member shall also be appointed by the Chairperson who shall attend Committee meetings and enjoy voting rights on the Committee only when serving as an alternate for a voting Committee member.
- (b) Non-Voting Membership. Chief Administrative Officer Pomerado Hospital, the Chief Financial Officer (CFO) or designee, nurse representative from PMC or POM and the Director of Facilities Planning and Development. As needed, other appropriate relevant staff in engineering, architectural, planning and Compliance and a Physician Advisory Committee member may be requested to attend along with PPH staff to facilitate the work of the committee.

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- (c) <u>Duties</u>. The duties of the Committee shall include but are not limited to:
  - (i) Review construction estimates and expenses for accuracy and architectural plans completeness and effectiveness;
  - (ii) Approve construction project change orders in accordance with applicable district law and PPH policies;
  - (iii) Receive reports from the Construction Manager and the Director of Facilities Planning and Development and recommend action to the Board regarding facilities design and maintenance;
  - (iv) Review regulations and reports regarding facilities and grounds from external agencies, accrediting bodies and insurance carriers and make recommendations for appropriate action regarding the same to the Board;
  - (v) Approve the annual Facilities Development Plan and regularly review updates on implementation of plan;
  - (vi) Receive a biannual Environment of Care report;
  - (vii) Perform such other duties as may be assigned by the Board.
- SPECIAL COMMITTEES. Special or ad hoc committees may be appointed by the Chairperson for special tasks as circumstances warrant and upon completion of the task for which appointed such special committee shall stand discharged. The Chairperson shall make assignments on special committees, and/or individual Board member assignments, to assure that each Board member shall have equal participation on special committees or individual Board assignments throughout the year. Some of the functions that may be the topic of special committees include the review of new projects, the review of special bylaw changes or the review of the Bylaws periodically, the meeting with other public agencies or health facilities on a specific topic and the evaluation of the Board.
- ADVISORS. A committee chairperson may invite individuals with expertise in a pertinent area to voluntarily work with and assist the committee. Such advisors shall not vote or be counted in determining the existence of a quorum and may be excluded from any committee session in the discretion of the committee chairperson.
- MEETINGS AND NOTICE. Meetings of a committee may be called by the Chairperson of the Board, the chairperson of the committee, or a majority of the committee's voting members. The chairperson of the committee shall be responsible for contacting alternate committee members in the event their participation is needed for any given committee meeting.
- 6.6 QUORUM. A majority of the voting members of a committee shall constitute a quorum for the transaction of business at any meeting of such committee. Each committee shall keep minutes of its proceedings and shall report periodically to the Board.
- 6.7 MANNER OF ACTING. The act of a majority of the members of a committee present at a meeting at which a quorum is present shall be the act of the committee so meeting. No act taken at a meeting at which less than a quorum was present shall be valid unless approved in writing by the absent

- members. Special committee action may be taken without a meeting by a writing setting forth the action so taken signed by each member of the committee entitled to vote.
- TENURE. Each member of a committee described above shall serve a one year term, commencing on the first day of January after the annual organizational meeting at which he or she is elected or appointed. Each committee member shall hold office until a successor is elected, unless he or she sooner resigns or is removed from office by the Board.

### ARTICLE VII. <u>OFFICERS</u>

- 7.1 CHAIRPERSON. The Board shall elect one of its members as Chairperson at an organizational regular meeting. In the event of a vacancy in the office of Chairperson, the Board may elect a new Chairperson. The Chairperson shall be the principal officer of the District and the Board, and shall preside at all meetings of the Board. The Chairperson shall appoint all Board committee members and committee chairpersons, and shall perform all duties incident to the office and such other duties as may be prescribed by the Board from time to time.
- 7.2 VICE CHAIRPERSON. The Board shall elect one of its members as Vice Chairperson at an organizational meeting. In the absence of the Chairperson, the Vice Chairperson shall perform the duties of the Chairperson.
- 7.3 SECRETARY. The Board shall elect one of its members Secretary at an organizational meeting. The Secretary shall provide for the keeping of minutes of all meetings of the Board. The Secretary shall give or cause to be given appropriate notices in accordance with these bylaws or as required by law and shall act as custodian of District records and reports and of the District's seal.
- 7.4 TREASURER. The Board shall appoint a Treasurer who shall serve at the pleasure of the Board. The Treasurer shall be charged with the safekeeping and disbursal of the funds in the treasury of the District. The Treasurer may be the chairperson of the Finance Committee.
- 7.5 TENURE. Each officer described above shall serve a one-year term, commencing on the first day of January after the organizational meeting at which he or she is elected to the position. Each officer shall hold office until the end of the one year term, or until a successor is elected, unless he or she shall sooner, resign or is removed from office.
- 7.6 REMOVAL. An officer described above may be removed from office by the affirmative vote of four members of the Board not counting the affected Board member. In addition, an officer described above will automatically be removed from office when his or her successor is elected and is sworn in as a Board member.
- PRESIDENT AND CHIEF EXECUTIVE OFFICER. The Board shall select and employ a President and Chief Executive Officer who shall report to the Board. The President and Chief Executive Officer shall have sufficient education, training, and experience to fulfill his or her responsibilities, which shall include but not be limited to:
  - 7.7.1 Reviewing, recommending changes to, and implementing District Policies and Procedures. By working with standing and special committees of the Board and joint committees of the Medical Staffs of the Facilities, the President and Chief Executive

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Officer is to participate in the elaboration of policies which provide the framework for patient care of high quality at reasonable cost.

- 7.7.2 Maintaining District records and minutes of Board and committee meetings.
- 7.7.3 Overall operation of the District, its Facilities and other health services, including out-of-hospital services sponsored by the District. This includes responsibility for coordination among Facilities and services to avoid unnecessary duplication of services, facilities and personnel, and control of costs. This also includes responsibility for sound personnel, financial, accounting and statistical information practices, such as preparation of District budgets and forecasts, maintenance of proper financial and patient statistical records, collection of data required by governmental and accrediting agencies, and special studies and reports required for efficient operation of the District.
- 7.7.4 Implementing community relations activities, including, as indicated, public appearances, responsive communication with the media.
- Assisting the Board in planning services and facilities and informing the Board of Governmental legislation and regulations and requirements of official agencies and accrediting bodies, which affect the planning and operation of the facilities, services and programs sponsored by the District, and maintenance appropriate liaison with government and accrediting agencies and implementing actions necessary for compliance.
- 7.7.6 Ensuring the prompt response by the Board and/or District personnel to any recommendations made by planning, regulatory or accrediting agencies.
- 7.7.7 Hiring and termination of all employees of the District. To the extent the President and Chief Executive Officer deems appropriate, the President and Chief Executive Officer shall delegate to the District Officers the authority to hire and terminate personnel of their respective hospitals or other entities.
- 7.7.8 Administering professional contracts between the District and Practitioners.
- 7.7.9 Providing the Board and Board committee with adequate staff support.
- 7.7.10 Sending periodic reports to the Board and to the Medical Staffs on the overall activities of the District and the Facilities, as well as pertinent federal, state and local developments that effect the operation of District Facilities.
- 7.7.11 Providing liaison among the Board, the Medical Staffs, and the District's operating entities.
- 7.7.12 The maintenance of insurance or self-insurance on all physical properties of the District.
- 7.7.13 Designate other individuals by name and position who are, in the order or succession, authorized to act for the District Officers during any period of absence.

- 7.7.14 Participating as a non-voting member in all meetings of standing committees of the Board.
- 7.7.15 Such other duties as the Board may from time to time direct.
- ADMINISTRATIVE OFFICERS. The President and Chief Executive Officer, with the approval of the Board, may select and employ an Administrative Officer or other responsible individual for each of the Facilities, who shall report to the President and Chief Executive Officer. The Administrative Officer or other responsible individual shall be responsible for the day-to-day administration of their respective Facilities. Specifically, each such individual shall:
  - 7.8.1 Be responsible for implementing policies of the Board in the operation of the Facility.
  - 7.8.2 Provide the Facility's professional staff with the administrative support and personnel reasonably required to carry out their review and evaluation activities.
  - 7.8.3 Organize the administrative functions of the Facility, delegate duties, and establish formal means of accountability on the part of subordinates.
  - 7.8.4 Be responsible for selecting, employing, controlling and discharging employees, in accordance with the authority delegated by the President and Chief Executive officer.
  - Assist the President and Chief Executive Officer and the Finance Committee in annually reviewing and updating a capital budget and preparing an operating budget showing the expected receipts and expenditures for the Facilities, and supervise the business affairs of the Facilities to assure that the funds are expended in the best possible advantage.
  - 7.8.6 Perform any other duty within the express or implicit terms of his or her duties hereunder that may be necessary for the interest of the Facilities.
  - 7.8.7 Be responsible for the maintenance of the Facility's property.
  - 7.8.8 Perform such other duties as the Board or President and Chief Executive Officer may from time to time direct.
- 5.9 SUBORDINATE OFFICERS. The President and Chief Executive Officer, with the approval of the Board, may select and employ, such other officers as the District may require, each of who shall hold office for such period, have such authority, and perform such duties as the Board may from time to time determine.

## ARTICLE VIII. MEDICAL STAFFS

#### 8.1 ORGANIZATION.

There shall be separate Medical Staff organizations for each of the District's Hospitals with appropriate officers and bylaws and with staff appointments on a biennial basis. The Medical Staff of each Hospital shall be self-governing with respect to the professional work performed in that Hospital. Membership in the respective Medical

Staff organization shall be a prerequisite to the exercise of clinical privileges in each Hospital, except as otherwise specifically provided in the Hospital's Medical Staff bylaws.

- District Facilities other than the Hospitals may also have professional personnel organized as a medical or professional staff, when deemed appropriate by the Board pursuant to applicable law and Joint Commission on Accreditation of Healthcare Organizations ("JCAHO") and/or other appropriate accreditation standards. The Board shall establish the rules and regulations applicable to any such staff and shall delegate such responsibilities, and perform such functions, as may be required by applicable law and JCAHO and/or other appropriate accreditation standards. To the extent provided by such rules, regulations, laws and standards, the medical or professional staffs of such Facilities shall perform those functions specified in this Article VIII.
- MEDICAL STAFF BYLAWS. Each Medical Staff organization shall propose and adopt by vote bylaws, rules and regulations for its internal governance which shall be subject to, and effective upon, Board approval, which shall not be unreasonably withheld. The bylaws, rules and regulations shall be periodically reviewed for consistency with Hospital policy and applicable legal or other requirements. The bylaws shall create an effective administrative unit to discharge the functions and responsibilities assigned to the Medical Staffs by the Board. The bylaws, rules and regulations shall state the purpose, functions and organization of the Medical Staffs and shall set forth the policies by which the Medical Staffs exercise and account for their delegated authority and responsibilities. The bylaws, rules and regulations shall also establish mechanisms for the selection by the Medical Staff of its officers, departmental chairpersons and committees.

### 8.3 MEDICAL STAFF MEMBERSHIP AND CLINICAL PRIVILEGES.

- 8.3.1 Membership on the Medical Staffs shall be restricted to Practitioners who are competent in their respective fields, worthy in character and in professional ethics, and who are currently licensed by the State of California. The bylaws of the Medical Staffs may provide for additional qualifications for membership and privileges, as appropriate.
- While retaining its ultimate authority to independently investigate and/or evaluate Medical Staff matters, the Board hereby delegates to the Medical Staffs the responsibility and authority to carry out Medical Staff activities, including the investigation and evaluation of all matters relating to Medical Staff membership, clinical privileges and corrective action. The Medical Staffs shall forward to the Board specific written recommendations, with appropriate supporting documentation that will allow the Board to take informed action, related to at least the following:
  - (a) Medical Staff structure and organization;
  - (b) The process used to review credentials and to delineate individual clinical privileges;
  - (c) Appointing and reappointing Medical Staff members, and restricting, reducing, suspending, terminating and revoking Medical Staff membership;

- (d) Granting, modifying, restricting, reducing, suspending, terminating and revoking clinical privileges;
- (e) All matters relating to professional competency;
- (f) The process by which Medical Staff membership may be terminated; and
- (g) The process for fair hearing procedures.
- Final action on all matters relating to Medical Staff membership, clinical privileges and corrective action shall be taken by the Board after considering the Medical Staff recommendations. The Board shall utilize the advice of the Medical Staff in granting and defining the scope of clinical privileges to individuals, commensurate with their qualifications, experience, and present capabilities. If the Board does not concur with the Medical Staff recommendation relative to Medical Staff appointment, reappointment or termination of appointment and granting or curtailment of clinical privileges, there shall be a review of the recommendation by a conference of two Board members and two members of the relevant Medical Staff, before the Board renders a final decision.
- No applicant shall be denied Medical Staff membership and/or clinical privileges on the basis of sex, race, creed, color, or national origin, or on the basis of any other criterion lacking professional justification. The Hospitals shall not discriminate with respect to employment, staff privileges or the provision of professional services against a licensed clinical psychologist within the scope of his or her licensure, or against a physician, dentist or podiatrist on the basis of whether the physician or podiatrist holds an M.D., D.O, D.D.S., D.M.D. or D.P.M. degree. Wherever staffing requirements for a service mandate that the physician responsible for the service be certified or eligible for certification by an appropriate American medical board, such position may be filled by an osteopathic physician who is certified or eligible for certification by the equivalent appropriate American Osteopathic Board.

#### 8.4 PERFORMANCE IMPROVEMENT.

- The Medical Staffs shall meet at regular intervals to review and analyze their clinical experience, in order to assess, preserve and improve the overall quality and efficiency of patient care in the Hospitals and other District Facilities, as applicable. The medical records of patients shall be the basis for such review and analysis. The Medical Staffs shall identify and implement an appropriate response to findings. The Board shall further require mechanisms to assure that patients with the same health problems are receiving a consistent level of care. Such performance improvement activities shall be regularly reported to the Board.
- The Medical Staffs shall provide recommendations to the Board as necessary regarding the organization of the Medical Staffs' performance improvement activities as well as the processes designed for conducting, evaluating and revising such activities. The Board shall take appropriate action based on such recommendations.
- 8.4.3 The Board hereby delegates to the Medical Staffs the responsibility and authority to carry out these performance improvement activities. The Board, through the President and

Chief Executive Officer, shall provide whatever administrative assistance is reasonably necessary to support and facilitate such performance improvement activities.

- 8.5 MEDICAL RECORDS. A complete and accurate medical record shall be prepared and maintained for each patient.
- 8.6 TERMS AND CONDITIONS. The terms and conditions of Medical Staff membership, and of the exercise of clinical privileges, shall be as specified in the Hospitals' Medical Staff bylaws.
- 8.7 PROCEDURE. The procedure to be followed by the Medical Staff and the Board in acting on matters of membership status, clinical privileges, and corrective action, shall be specified in the applicable Medical Staff bylaws.
- APPELLATE REVIEW. Any adverse action taken by the Board with respect to a Practitioner's Staff status or clinical privileges, shall, except under circumstances for which specific provision is made in the Medical Staff bylaws, be subject to the practitioner's right to an appellate review in accordance with procedures set forth in the bylaws of the Medical Staffs.

### ARTICLE IX. AUXILIARY ORGANIZATIONS

- 9.1 FORMATION. The Board may authorize the formation of auxiliary organizations to assist in the fulfillment of the purposes of the District. Each such organization shall establish its bylaws, rules and regulations, which shall be subject to Board approval and which shall not be inconsistent with these bylaws or the policies of the Board.
- 9.2 EXISTING ORGANIZATIONS. The Palomar Medical Center Auxiliary and the Pomerado Hospital Auxiliary are existing auxiliary organizations to assist in the fulfillment of the purposes of the District, both of which have been authorized, and their bylaws approved, by the Board.

### ARTICLE X. CLAIMS AND JUDICIAL REMEDIES

- 10.1 CLAIMS. The District is subject to Division 3.6 of Title 1 of the California Government Code, pertaining to claims against public entities. The Chief Executive Officer or his designee is authorized to perform those functions of the Board specified in Part 3 of that Division, including the allowance, compromise or settlement of any claims if the amount to be paid from the District's treasury does not exceed \$50,000. Any allowance, compromise or settlement of any claim in which the amount to be paid from the District's treasury exceeds \$10,000 shall be approved personally by the Chief Executive Officer rather than his or her designee.
- JUDICIAL REVIEW. The California Code of Civil Procedure shall govern the rights of any person aggrieved by any decision of the Board or the District, including but not limited to an action taken pursuant to Article VIII of these Bylaws.
- 10.3 CLAIMS PROCEDURE. Notwithstanding any exceptions contained in Section 905 of the Government Code, no action based on a claim shall be brought against the District unless presented to the District within the time limitations and in the manner prescribed by Government Code Section 910 et seq., and shall be further subject to Section 945.4 of the Government Code.

## ARTICLE XI. AMENDMENT

These bylaws may be amended or repealed by vote of at least four members of the Board at any Board meeting. Such amendments or repeal shall be effective immediately, except as otherwise indicated by the Board.

### SECRETARY'S CERTIFICATE

| Director | s for Palon | e undersigned,<br>ar Pomerado l<br>Bylaws of Pal | Health, do | hereby     | y certify th | ied and actin<br>nat attached | g Secreta<br>hereto is a              | ry of the Board of<br>true, complete a | of<br>and correc |
|----------|-------------|--|------------|------------|--------------|-------------------------------|---------------------------------------|--|------------------|
| Dated:   |             |  | 2006       | <b>:</b> . |              | \$                            |                                       |  |                  |
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| in p     |             |  | £ 4.       |            |              | Secretary                     |                                       |  |                  |

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