

**Palomar Pomerado Health  
STRATEGIC PLANNING COMMITTEE  
PALOMAR MEDICAL CENTER  
September 18, 2007**

AGENDA ITEM	DISCUSSION	CONCLUSION/ ACTION	FOLLOW-UP/ RESPONSIBLE PARTY
<b>CALL TO ORDER</b>	Dr. Larson called the meeting to order at 6:05 p.m. There were no requests for public comments		
<b>ESTABLISHMENT OF QUORUM</b>	Dr. Larson, Nancy Bassett, Michael Covert, Bruce Krider, Dr. Rivera, and Dr. Kanter. Also attending were Gerald Bracht, Dr. Buringrud, Steve Gold, Lorie Harmon, Marcia Jackson, Lorie Shoemaker, and Dr. Trifunovic. Guests: Natalie Bennett, Sheila Brown, Kwaja Floyd, Gustavo Friederichsen, Dr. Kung, Stonish Pierce, Orlando Portale, Steve Tanaka, and Brad Wiscons.		
<b>NOTICE OF MEETING</b>	The notice of meeting was mailed consistent with legal requirements.		
<b>APPROVAL OF MINUTES – August 14, 2007</b>		<b>Motion by Nancy Bassett, seconded by Dr. Kanter, and carried unanimously.</b>	

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<p><b>NEUROSCIENCES STRATEGIC PLAN</b></p>	<p>This Strategic Plan provides an analysis and evaluation of the research behind and the necessary steps to implement a Neurosciences Institute at Palomar Pomerado Health. The proposed plan will organize existing services and recommend new programs to offer a comprehensive neurological continuum.</p> <p>The plan for the Neurosciences Institute has been designed to ensure PPH fulfills the commitment of providing accessible services to our community and improving the quality of life of our patients. The methods of analysis included trend, market, product line, gap, and financial.</p> <p>Michael Covert said that PPH's significant challenge is the medical leadership it would need to implement a Neurosciences Institute at PPH, and how we could bring in these leaders.</p> <p>Bruce Krider said that we would need a pivotal leader, a "star," not just a new grad. Dr. Kanter commented that while the plan is terrific, our locations are very dispersed now; but there are many implications for us in the future, especially in the new facilities. Dr. Kung expressed concern over how far behind PPH is, compared to some of the more advanced facilities.</p> <p>Dr. Rivera commented that there are certain specialties he feels comfortable referring patients to, such as minimally invasive spine surgery, and Kyphoplasty; he feels like a stroke center would be reasonable, but if there was a complication, we would need a neurosurgeon who can immediately go in if there were to be an intracranial bleed.</p> <p>Dr. Kanter suggested that we do a pre-Institute plan to set a plan for what we need to do to get really ready for being a Neurosciences Institute.</p>		

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	<p>Dr. Trifunovic said that we might be being shortsighted. If we were willing to spend substantial money to get a non-new grad, what would we invest in? He suggested that we don't try for everything all at once, but bit-by-it, and then we could be up and running in 2 years.</p> <p>Bruce Krider said that this would be like building any business – we would have options, and we have the capital to make it happen.</p> <p>Dr. Larson said that primary care is consistently an issue; with our limited resources, where are we going to use them? He suggested that we improve upon our services that people access through our emergency rooms, and build on our strengths before we bring in new doctors in other aspects.</p> <p>Michael Covert stated that he has been here before, and suggested that PPH take a different tack – for example, find an expert on Parkinson's or epilepsy as an area of expertise, to differentiate us, to build towards being ready to attract the neurosurgeon star.</p> <p>Dr. Kanter agreed and added that neuro-critical care (like UCLA has) should also be considered.</p> <p>Nancy Bassett commented that it would be a good idea to focus on neurology services for the elderly since Pomerado Hospital has a large retirement community clientele.</p> <p>Michael Covert stated that the next step to be taken would be to do a business plan.</p>		

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<b>DRIVING INNOVATION PROGRAMS</b>	<p>PPH recently created a new position for a Chief Technology and Innovation Officer to be a catalyst to move PPH forward in researching and adopting new technologies and innovative opportunities. Orlando Portale presented a framework for PPH to drive innovation programs in our organization.</p> <p>Michael Covert explained that our desire has been to be an innovative organization, and that he brought Orlando in to help jump-start this. We need to be innovative from the inside, but also to get external partners to work with us on innovative projects.</p> <p>Orlando explained that he views his role as an accelerant, and that Management's role will be to execute the methods of innovation. He further added that increased competitiveness will allow us to produce more competitive, creative ideas, and we will realize a return on investment on these ideas when they come to fruition. We need to infuse innovation into our business strategy, and leverage technology and innovation to improve the health of our community.</p> <p>Orlando discussed many applications of innovative technology that are already in use, including the Life Bed, which measures respiration and heart rate (Mary Oelman is looking at piloting this at Pomerado), Remote Presence Robotics, and Programmable Home Health Monitoring Devices.</p> <p>Dr. Rivera suggested having Orlando make a presentation to the full Board of Directors, and Michael Covert suggested that this could be done as a Board education session once the Board selects a replacement for Gary Powers.</p>		

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<b>COMMITTEE COMMENTS, SUGGESTIONS</b>	There were no additional Committee comments or suggestions.		
<b>ADJOURNMENT</b>	8:45 p.m.		
<b>SIGNATURES</b>  Committee Chairperson  Recording Secretary	<hr/> Alan Larson, M.D., Committee Chair  <hr/> Lorie Harmon		