I. CALL TO ORDER

II. PUBLIC COMMENTS

  5 minutes allowed per speaker, with a cumulative total of 15 minutes per group
  For further details and policy see Request for Public Comments notices available in the meeting room


IV. OLD BUSINESS

A. Prior Meeting Action Items

V. NEW BUSINESS

* A. Resolution No. 01.13.12(01)-1 – Acknowledging Appointment of the New Board and Confirming the Election of Officers for Calendar Year 2012

* B. Resolution No. 01.13.12(02)-2 – Establishing Regular Board Meetings: Calendar Year 2012

* C. Resolution No. 01.13.12(03)-3 – Confirming Appointment of the Officers of the Corporation for Calendar Year 2012

* D. Recommended Procedure for Board Approval of Physician Agreements

* E. Amendment to Management Services Agreement with PPH


VI. PRESENTATIONS

A. Update on Grants and Contracts Inventory (Addendum C – Pp34-40)

B. Grant Proposal Update:

I. Robert Wood Johnson Foundation Future of Nursing Grant (Addendum D – Pp41-46)

C. Program Activities Updates:

I. Archstone Foundation

II. Transitions Into Practice

III. Interlink Pathways

VII. INFORMATION ITEMS

* A. Medical Directorship for First 5 Healthy Development Services

VIII. BOARD MEMBER COMMENTS/FUTURE AGENDA ITEMS

IX. FINAL ADJOURNMENT
TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Tanya Howell, Corporate Secretary

Background: The minutes of the Regular Quarterly Meeting held on Friday, October 7, 2011, are respectfully submitted for approval (Addendum A).

Budget Impact: N/A

STAFF RECOMMENDATION: Approval of the October 7, 2011, Regular Quarterly Meeting minutes.

Motion: X

Individual Action:

Information:

Required Time:
Prior Meeting Action Items

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Tanya Howell, Corporate Secretary

Background: As discussed at the Regular Quarterly Meeting in October, the attached Prior Meeting Action Items listing will be presented at each meeting as a means of tracking topics that require follow-up at future meetings. Items color-coded green will appear as informational/action items on the agenda for the current meeting.

Budget Impact: N/A

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
1 4/8/11: Palliative Care – Dr. Brenda Fischer will be invited to the April 2012 meeting to provide an update on Palliative Care

2 10/7/11: MSA between PPH & HD – Director Krider requested that this item be revisited at the next meeting for discussion of an increase in the amount paid
Resolution No. 01.13.12(01)-1 Acknowledging Appointment of the New Board and Confirming Election of Officers for Calendar Year 2012

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Bob Hemker, Chief Financial Officer

Background: The Bylaws of Palomar Pomerado North County Health Development, Inc. (“Health Development”) {ARTICLE IV, Section 4.03(a) as amended October 25, 2006} require that the Board’s Annual Organizational Meeting be held in January. ARTICLE IV, Section 4.07, also requires that the Board elect officers at its Annual Organizational Meeting: “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.”

- The officers for Calendar Year 2011 were:
  - Linda Greer, RN, Chairperson
  - Bruce Krider, Vice-Chairperson
  - Marcelo Rivera, MD, Secretary
  - Bob Hemker, Treasurer

Budget Impact: N/A

STAFF RECOMMENDATION: Staff recommends that the Board elect a Chairperson, a Vice Chairperson and a Secretary and adopt Resolution No. 01.13.12(01)-1 after it is amended to include the names of those officers.

Motion:

Individual Action: X

Information:

Required Time:
RESOLUTION NO. 01.13.12(01)–1

RESOLUTION OF THE BOARD OF DIRECTORS OF
PALOMAR POMERADO NORTH COUNTY HEALTH DEVELOPMENT, INC.
ACKNOWLEDGING APPOINTMENT OF THE NEW BOARD AND CONFIRMING
ELECTION OF OFFICERS FOR CALENDAR YEAR 2012

WHEREAS, the Directors of Palomar Pomerado North County Health Development, Inc. [Health Development] shall be elected by the Member—Palomar Pomerado Health—pursuant to Section 3.01 of the Health Development Bylaws; and,

WHEREAS, the Member has duly appointed the following to serve as the directors of the Health Development Board: Linda C. Greer, R.N., Bruce G. Krider, M.A., Marcelo R. Rivera, M.D., Michael H. Covert, FACHE, and Robert A. Hemker; and,

WHEREAS, the Health Development Board shall elect officers at its annual organizational meeting, pursuant to Section 4.07 of the Health Development Bylaws;

NOW, THEREFORE, IT IS HEREBY RESOLVED by the Board of Directors of Health Development that the appointment of the new Board of Directors by the Member is hereby acknowledged and that the following slate of officers is hereby elected for Calendar Year 2012:

Chairperson

Vice-Chairperson

Secretary

Treasurer

PASSED AND ADOPTED at the meeting of the Board of Directors of Health Development, held on January 13, 2012, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAINING:

DATED: January 13, 2012

APPROVED:

ATTESTED:

Chairperson
Board of Directors
Palomar Pomerado North County Health Development, Inc.

Secretary
Board of Directors
Palomar Pomerado North County Health Development, Inc.
Resolution No. 01.13.12(02)-2
Establishing Regular Board Meetings for Calendar Year 2012

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Tanya Howell, Corporate Secretary

Background: The Bylaws of Palomar Pomerado North County Health Development, Inc. (“Health Development”) {ARTICLE IV, Section 4.03(b) as amended October 25, 2006} require that the Board pass a Resolution stating the dates, times and places of the Board’s regular meetings for the calendar year..

As this is the Annual Organizational Meeting of the Board, the attached Resolution stating the dates, times and places of the Board’s regular meetings for the calendar year has been drafted, based on the Board’s quarterly meeting schedule during calendar year 2011.

Budget Impact: N/A

STAFF RECOMMENDATION: Staff recommends that the Board set the dates, times and places for the Board’s regular meetings for Calendar Year 2012, and that the Board adopt Resolution No. 01.13.12(02)-2.

Motion:

Individual Action: X

Information:

Required Time:
RESOLUTION NO. 01.13.12(02)–2

RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR POMERADO NORTH COUNTY HEALTH DEVELOPMENT, INC. ESTABLISHING REGULAR BOARD MEETINGS FOR CALENDAR YEAR 2012

WHEREAS, Palomar Pomerado North County Health Development, Inc. [Health Development] is required, pursuant to Section 54954 of the California Government Code and Section 4.03(b) of the Health Development Bylaws, to pass a resolution adopting the time, place and location of the regular board meetings;

NOW, THEREFORE, IT IS HEREBY RESOLVED by the Board of Directors of Health Development that the following schedule of regular meetings will apply for its Calendar Year 2012 (January – December):

### CALENDAR YEAR 2012 BOARD MEETING SCHEDULE

<table>
<thead>
<tr>
<th>DATE</th>
<th>PURPOSE OF MEETING</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday January 13, 2012 12:00 – 2:00 p.m.</td>
<td>Annual Organizational Meeting Fiscal Year 2012</td>
<td>1st Floor Conf Room PPH Administration 456 E. Grand Ave., Escondido</td>
</tr>
<tr>
<td>Friday April 13, 2012 12:00 – 2:00 p.m.</td>
<td>Regular Quarterly Meeting Fiscal Year 2012</td>
<td>1st Floor Conf Room PPH Administration 456 E. Grand Ave., Escondido</td>
</tr>
<tr>
<td>Friday July 13, 2012 12:00 – 2:00 p.m.</td>
<td>Regular Quarterly Meeting Fiscal Year 2013</td>
<td>1st Floor Conf Room PPH Administration 456 E. Grand Ave., Escondido</td>
</tr>
<tr>
<td>Friday October 12, 2012 12:00 – 2:00 p.m.</td>
<td>Regular Quarterly Meeting Fiscal Year 2013 Annual Report Fiscal Year 2011</td>
<td>1st Floor Conf Room PPH Administration 456 E. Grand Ave., Escondido</td>
</tr>
</tbody>
</table>

PASSED AND ADOPTED at the meeting of the Board of Directors of Health Development, held on January 13, 2012, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAINING:

DATED: January 13, 2012

APPROVED: ATTESTED:

Chairperson
Board of Directors
Palomar Pomerado North County Health Development, Inc.

Secretary
Board of Directors
Palomar Pomerado North County Health Development, Inc.
Resolution No. 01.13.12(03)-3 Confirming Appointment of the Corporate Officers for Calendar Year 2012

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Bob Hemker, Chief Financial Officer

Background: The Bylaws of Palomar Pomerado North County Health Development, Inc. (“Health Development”) {ARTICLE IV, Sections 5.01-5.02} state the officers of the Corporation shall be a President, a Secretary, and a Chief Financial Officer. Further, the officers of the Corporation shall be chosen annually by, and shall serve at the pleasure of, the Board.

- The Corporate Officers for calendar year 2011 were:
  - Michael Covert, FACHE, President
  - Tanya Howell, Secretary
  - Bob Hemker, Chief Financial Officer

Budget Impact: N/A

STAFF RECOMMENDATION: Staff recommends that the Board appoint a President, a Secretary and a Chief Financial Officer as officers of the Corporation, and adopt Resolution No. 01.13.12(03)-3 Confirming Appointment of the Officers of the Corporation for Calendar Year 2012 after it is amended to include the names of those officers.

Motion:

Individual Action: X

Information:

Required Time:
RESOLUTION NO. 01.13.12(03)-3

RESOLUTION OF THE BOARD OF DIRECTORS OF
PALOMAR POMERADO NORTH COUNTY HEALTH DEVELOPMENT, INC.
CONFIRMING APPOINTMENT OF THE OFFICERS OF THE CORPORATION
FOR CALENDAR YEAR 2012

WHEREAS, the Officers of the Corporation Palomar Pomerado North County Health Development, Inc. [Health Development] shall be a President, a Chief Financial Officer, and a Secretary – pursuant to Section 5.01 of the Health Development Bylaws; and,

WHEREAS, the Officers of the Corporation Health Development shall be chosen annually by, and shall serve at the pleasure of, the Board – pursuant to Section 5.02 of the Health Development Bylaws;

NOW, THEREFORE, IT IS HEREBY RESOLVED by the Board of Directors of Health Development that the following slate is hereby appointed Officers of the Corporation Health Development for Calendar Year 2012:

______________________________
President

______________________________
Chief Financial Officer

______________________________
Secretary

PASSED AND ADOPTED at the meeting of the Board of Directors of Health Development, held on January 13, 2012, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAINING:

DATED: January 13, 2012

APPROVED:  ATTESTED:

______________________________
Chairperson
Board of Directors
Palomar Pomerado North County Health Development, Inc.

______________________________
Secretary
Board of Directors
Palomar Pomerado North County Health Development, Inc.
Recommended Procedure for
Board Approval of Physician Agreements

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

BY: Bob Hemker, Chief Financial Officer

Background: As a means of streamlining the approval process for Budgeted Routine Physician Agreements, the PPH Board recently approved a revision to that process, removing the requirement for pre-approval by the PPH Board. In lieu of prior approval, all Budgeted Routine Physician Agreements that became effective during the previous month are now presented as an informational update through the PPH Board Finance Committee. That update includes the standard Form A and Abstract Table for each signed Agreement.

Budget Impact: N/A

STAFF RECOMMENDATION: Staff recommends adoption of a similar process for the approval of Budgeted Routine Physician Agreements with Health Development and has drafted the attached procedure for the Board’s review and approval.

Motion: X

Individual Action:

Information:

Required Time:
Palomar Pomerado North County Health Development, Inc.
Procedure for Board Approval of Physician Agreements

I. PURPOSE:
To establish a procedure for Health Development Board approval for physician agreements.

II. DEFINITIONS:
A. **Routine Physician Agreements** Routine agreements that are in the form of a template or standard format. Examples may include but are not limited to: Medical Director, Independent Contractor, Physician Advisor, Travel, Training/Education, etc.
B. **Non-Budgeted Agreements** Agreements that require funds which were not approved in the prior fiscal year’s budget.
C. **Budgeted Agreements** Agreements that require funds which were approved in the prior fiscal year’s budget.
D. **Clinical Study/Trial Agreements** This category covers Agreements in which no funds are exchanged between Health Development and the Physician.

III. STANDARDS OF PRACTICE:
A. N/A

IV. STEPS OF PROCEDURE:
A. **Budgeted, Routine Physician Agreements**
   1. All Budgeted, Routine Physician Agreements do not require prior Board approval.
   2. All Budgeted, Routine Physician Agreements must comply with PPH Lucidoc Procedure # 33572 Contract Review Procedure For Physician Agreements.
   3. A Form A and Abstract Table must be completed for all Budgeted, Routine Physician Agreements and be submitted to the Corporate Secretary of Health Development once the Agreement has been signed by both parties.
   4. Each quarter, a report will be made to the Board, summarizing all Budgeted, Routine Physician Agreements with effective dates during the previous quarter and will include the Form A and Abstract Tables previously submitted as required in §III.A.3.
B. **Non-Budgeted Physician Agreements**
   1. Non-Budgeted Physician Agreements will be required to go to the Board for approval prior to signature by Health Development and prior to commencement of services.
   2. All Non-Budgeted Physician Agreements must comply with PPH Lucidoc Procedure # 33572 Contract Review Procedure For Physician Agreements.
   3. A Form A and Abstract Table must be completed for all Department Closure and Non-Budgeted Physician Agreements and submitted to the Corporate Secretary of Health Development prior to any Board approval.
C. **Clinical Study/Trial Agreements**
   1. Clinical Study/Trial Agreements do not need to go through any type of Board approval.
   2. All Clinical Study/Trial Agreements must comply with PPH Lucidoc Procedure # 32693 Contract Review Procedure.
   3. A Form A and Abstract do not need to be filled out for Clinical Study/Trial Agreements.
   4. No quarterly report will be made to the Board regarding Clinical Study/Trial Agreements.
Administrative Oversight for Health Development

TO: Health Development Board
MEETING DATE: Friday, January 13, 2012
FROM: Bob Hemker, Chief Financial Officer

Background: At the Regular Quarterly Meeting in October, the Health Development Board approved the creation of a Management Services Agreement between Health Development and Palomar Pomerado Health for reimbursement of the time spent by the PPH Finance Department to provide administrative oversight for the studies being conducted through the Research Institute. Also at that meeting, Director Krider requested that the topic be revisited at this meeting to discuss a potential increase in the amount paid, to reflect actual costs incurred.

As PPH Finance Department staff also provides administrative oversight for the grants being managed through Health Development, it is also being requested that the actual costs incurred for those oversight activities be reviewed for possible inclusion in the Management Services Agreement.

Budget Impact: To be discussed at the meeting

STAFF RECOMMENDATION: Staff will make a recommendation at the meeting

Motion: X

Individual Action:

Information:

Required Time:
Financial Report

TO: Health Development Board
MEETING DATE: Friday, January 13, 2012
FROM: Bob Hemker, Chief Financial Officer

Background: At each regularly scheduled meeting of the Board of Directors of Health Development, the staff members provide the most recent financial report. Kristine Roberts will review the Health Development/Research Institute Fiscal Year 2012 YTD Financial Reports (See Addendum B).

Budget Impact: None.

STAFF RECOMMENDATION: Approval.

Motion: X

Individual Action:

Information:

Required Time:
Update on Grants

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Bob Hemker, Chief Financial Officer

Background: Kristine Roberts will update the Board on grants managed by Health Development (See Addendum C).

Budget Impact: None.

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Brenda Fischer, RN, PhD, MBA, CPHQ
       Director Center for Nursing Excellence

Background: A grant application brief has been submitted to the Robert Wood Johnson Foundation (RWJF), Institute of Medicine (IOM), The Future of Nursing, Campaign for Action, as a collaborative with California State University, San Marcos (CSUSM), Palomar College, MiraCosta College, and Palomar Pomerado Health (PPH). The funders have a 30 day turnaround time to inform us that we have been selected to submit the full grant proposal (See brief proposal attached as Addendum D).

Budget Impact: Total Funding for the project requested $2.5 million

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
Archstone Foundation Grant

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Brenda Fischer, RN, PhD, MBA, CPHQ
Director Center for Nursing Excellence

Background: PPNCHD received funding as part of a 9 hospital demonstration project from the Archstone Foundation for a 2-year grant to provide funding to assist in improving the quality of spiritual care provided by the transdisciplinary team to the critically ill patients in the Medical Surgical Intensive Care Units (MSICUs) at Palomar Medical Center (PMC).

- The team recently attended a project convening meeting with all 9 hospitals in the demonstration project held in Los Angeles at the California Endowment.
- Brenda Fischer is working with Dr. Robert Trifunovic to develop a business plan for a system-wide palliative care program.
- Successful outcomes to date include:
  1. Automated spiritual screen, history, assessment and care plan process involving 3 disciplines are built and integrated into the electronic medical record.
  3. A Plan Do Check Act process has been approved to expand spiritual care process outside of the ICU.

Budget Impact: Total Funding for the 2 year project is $200,000

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Brenda Fischer, RN, PhD, MBA, CPHQ
Director Center for Nursing Excellence

Background: PPNCHD was awarded a grant from San Diego Workforce Partnership to provide a transition from education to practice through a residency program for Bachelor of Science in Nursing (BSN) students in their last semester prior to graduation. This program is a collaborative partnership between an educational institution, California State University, San Marcos (CSUSM) School of Nursing (SON) and Palomar Pomerado Health (PPH) Center for Nursing Excellence. These 15 residents will be hired into medical/surgical RN 1 positions at PMC West on successful completion of the program.

- Evidence-based interviews to select the 15 residents are scheduled for Monday, January 9, 2012.
- PPH and CSUSM are presenting successful outcomes of the Transitions into Practice I program as well as this new program at the ATI National Nurse Educator Conference this April to be held in Scottsdale.

Budget Impact: Total grant funding for the project is $75,000 and includes resident stipends for 12 hours precepted clinical experience each week and text books.

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
West Grant Update – Interlink Pathways

TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Leslie Solomon, Manager, Learning and Development

Background:
Interlink Pathways is in the 5th month of implementation on the Gary and Mary West Foundation grant for Workforce Development. The attached data matrix has been established with baseline data and improvement targets for duration of the contract. Updates include:

- Types of internships: Clinical and Allied Health
- Acceptance rates for internships
- Workforce readiness activities and metrics for impact

Budget Impact:
The second installment on the contract will be paid based on performance to contract criteria.

STAFF RECOMMENDATION:
Motion:
Individual Action:
Information: X
Required Time:
<table>
<thead>
<tr>
<th>Objective 1: INTERLINK Pathways increases the number of internship opportunities for high school students</th>
</tr>
</thead>
<tbody>
<tr>
<td>-----------------</td>
</tr>
<tr>
<td># of new intern slots</td>
</tr>
<tr>
<td># of new internship slots at PPH</td>
</tr>
<tr>
<td># of new internship slots at CAB</td>
</tr>
<tr>
<td><strong>Note:</strong> Includes CCE Level I interns and Food and Nutrition Services Volunteer/Interns</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 2: INTERLINK Pathways assists additional health care academy students enter and complete internships</th>
</tr>
</thead>
<tbody>
<tr>
<td>-----------------</td>
</tr>
<tr>
<td># of internship education presentations</td>
</tr>
<tr>
<td># of undup students receiving internship education</td>
</tr>
<tr>
<td># of Internship Readiness (IR) workshops</td>
</tr>
<tr>
<td># of undup students participating in IR workshops</td>
</tr>
<tr>
<td># of students from IR workshops who apply and are interviewed for an internship*</td>
</tr>
<tr>
<td># of students from IR workshops who are recommended for internship</td>
</tr>
<tr>
<td># of students from IR workshops who successfully complete internship**</td>
</tr>
<tr>
<td><strong>Note:</strong> Includes CCE Level I interns and Food and Nutrition Services Volunteer/Interns</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 3: Speaker's Bureau exposes students to additional health occupations aside from medicine and nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>-----------------</td>
</tr>
<tr>
<td># of allied health and non-clinical Speaker's Bureau (SB) presenters</td>
</tr>
<tr>
<td># of SB presentations</td>
</tr>
<tr>
<td># of undup students participating in SB presentations</td>
</tr>
<tr>
<td># students with demonstrated knowledge of add'l health careers</td>
</tr>
<tr>
<td><strong>Note:</strong> Demonstrated knowledge was determined by favorable survey responses from students participating in SB presentations. Response rate: 75% (Q1)</td>
</tr>
</tbody>
</table>
TO: Health Development Board

MEETING DATE: Friday, January 13, 2012

FROM: Annamarie Martinez, Director WHB

Background: In accordance with the new physician agreement approval procedure for which approval was recommended earlier in this meeting, a one-year extension to the Budgeted Routine agreement for the Medical Directorship for First 5 Healthy Development Services (HDS) with Byron Chow, M.D., a Pediatrician at Neighborhood Healthcare Clinic and a member of the HDS North Inland Community Advisory Board, became effective during the month of January 2012 and has already been executed. The abstract table for that agreement is attached.

Budget Impact: Within the current HDS budget with First 5

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Term/Condition</th>
<th>Term/Condition Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TITLE</strong></td>
<td>First 5 Healthy Development Services (HDS) Medical Director</td>
<td></td>
</tr>
<tr>
<td><strong>AGREEMENT DATE</strong></td>
<td>January 1, 2011; amendment effective January 1, 2012</td>
<td></td>
</tr>
<tr>
<td><strong>PARTIES</strong></td>
<td>Byron Chow, MD</td>
<td></td>
</tr>
<tr>
<td><strong>PURPOSE</strong></td>
<td>Provide support to HDS team of therapists, social workers and registered nurses in providing developmental services including speech therapy, occupational therapy and physical therapy to children 0-5 years.</td>
<td></td>
</tr>
</tbody>
</table>

**Exhibit 1.1**  
**SCOPE OF SERVICES**  
1. Chart review for clients receiving grant-funded developmental services Level 3 (including speech therapy, occupational therapy and physical therapy) to confirm appropriateness of care  
   a. Individual Plan of Treatment (POT) is appropriate for child  
   b. Referrals are appropriate to existing resources  
2. Provides support to developmental service staff with recommendations based on chart reviews  
3. Serves as a physician liaison to PMC and POM Pediatric staff  
4. Serves on the HDS North Inland Advisory Board  
5. Attends quarterly meetings with HDS administrative team to identify opportunities for program level improvement  
6. Provide annual in-service to related topic of interest to HDS staff  

**PROCUREMENT METHOD**  
☐ Request For Proposal  
X Discretionary  

**5.1 NEW TERM**  
January 1, 2011 – December 31, 2012  

**5.2 RENEWAL**  
Annual up to 5 years  

**5.3 TERMINATION**  
Not less than 30 days of written notice without cause  
Immediately for cause  

**Exhibit 2.1**  
**COMPENSATION METHODOLOGY**  
Hourly rate with a maximum yearly compensation  

**BUDGETED**  
X YES ☐ NO – IMPACT:  

**EXCLUSIVITY**  
X NO ☐ YES – EXPLAIN:  

**JUSTIFICATION**  
Physician oversight will allow therapists to provide services to children 0-5 under the Healthy Development Services program.  

**AGREEMENT NOTICED**  
X YES ☐ NO  
Methodology & Response:  

**ALTERNATIVES/IMPACT**  
In order to provide therapy services to children 0-5, physician oversight is required.  

**Duties**  
Provision for Staff Education  
Provision for Medical Staff Education  
Provision for participation in Quality Improvement  

**COMMENTS**  

**APPROVALS REQUIRED**  
☒ Dept/Program Director ☐ Acting Executive Director ☐ BOD
ADDENDUM A
**I. CALL TO ORDER**
- Chairperson Linda Greer was unable to attend, so Vice-Chair Bruce Krider called the meeting to order as Acting Chair at 12:10 p.m.
- Quorum comprised of Directors Covert, Hemker, Krider. Directors Greer and Rivera were excused.
- Notice of Meeting and Full Agenda Packet were posted at PPH facilities and on the Health Development (HD) home page of the PPH web site on Friday, September 30, 2011, which is consistent with legal requirements. Notice of that posting was also made via email that same date.

**II. PUBLIC COMMENTS**
- There were no public comments

**III. MINUTES* – Regular Quarterly Meeting, April 8, 2011**
- No discussion

**IV. OLD BUSINESS***
- Prior meeting action items
  - Director Hemker presented the new Prior Meeting Action Items listing, created as a method of tracking topics that require follow-up at future meetings.
  

**V. NEW BUSINESS***

### A. FY2011 Pre-Audit Financial Report
- Utilizing the information included as Addendum C of the agenda packet, Kristine Roberts reviewed the pre-audit financials for the Fiscal Year ended June 30, 2011
  - Completed the FY 11 Pre-Audit report
  - Health Development
    - Revenue under budget by $5,534
    - Expenses positive variance $45,284

MOTION: By Director Hemker, seconded by Director Krider and carried to approve the FY2011 Pre-Audit Financial Report as presented. All in favor. None opposed.
### AGENDA ITEM

#### DISCUSSION

| Positive Net Income of $39,750 |  |
| Research Institute also had positive variances for revenue, expenses and net income |
| Positive Net Income of $38,009 |

#### B. YTD FY2012 Financial Report

**MOTION:** By Director Hemker, seconded by Director Krider and carried to approve the YTD FY2012 Financial Report as presented. All in favor. None opposed.

| Utilizing the information included as Addendum D of the agenda packet, Kristine Roberts reviewed the Year to Date FY2012 Financial Report. |
| Health Development |
| Revenue under budget by $5,363 – mostly related to Health Development Services – being conservative with salaries |
| Expenses – positive variance of $2,301 – mostly related to consulting fees – looks like smoking cessation grant will not move forward |
| Net Income is below budget by $3,063 |
| Research Institute |
| Revenue above budget |
| Net income is above budget |
| Healthy Development Services is 90% of indirect revenue |

### VI. PRESENTATIONS

#### A. Update on Health Development Grants

**Information Only**

<p>| Utilizing the presentation included as Addendum D of the agenda packet, Kristine Roberts presented an update on current grants, with additional comments noted below |
| Current Grants |
| Bioterrorism/Emergency Preparedness |
| Five years remaining on twelve-year contract |
| Main use is for purchase of equipment/supplies and communications equipment |
| Purchases for surge capacity and pandemic influenza |
| $433,533 in remaining funds |
| Green Oaks Ranch |
| Final year of contract |
| County plans to continue program |
| Waiting to hear when RFP will be released and will file at that point |
| $143,586 in remaining funds |</p>
<table>
<thead>
<tr>
<th>AGENDA ITEM</th>
<th>CONCLUSIONS/ACTION</th>
<th>FOLLOW-UP/RESP. PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I.A.</strong></td>
<td></td>
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<tr>
<td>• DISCUSSION</td>
<td></td>
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<tr>
<td>o MAA (Medical Administrative Services)</td>
<td></td>
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</tr>
<tr>
<td>− Recovers administrative costs associated with provision of Medi-Cal Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Withdrew further participation in the program at this time based upon cost/benefit of required resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o Marjorie Mosher Schmidt Foundation (Child Abuse Program)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− $17,000 awarded</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Used to provide funds for interior of SART/Child Abuse</td>
<td></td>
<td></td>
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<tr>
<td>o National Children’s Alliance</td>
<td></td>
<td></td>
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<tr>
<td>− Will submit another $5,000 at end of the year</td>
<td></td>
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<tr>
<td>− Used for cost of bilingual interviewer at PPH Child Abuse Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o Parker-North County Project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Not aware of any more money coming in for this grant</td>
<td></td>
<td></td>
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<tr>
<td>o United Way</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− $106,376 awarded; some funds remain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Not anticipating utilization of all funds by end of the year</td>
<td></td>
<td></td>
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<tr>
<td>− An extension will be requested</td>
<td></td>
<td></td>
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<tr>
<td>o Bilingual Interviewing Grant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− No plans to renew this grant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− All funds have been utilized</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o Healthy Development Services (HDS)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− $1,752,000 awarded annually for 5 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− On target financially; under on expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o In-n-Out – Child Abuse Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− SART utilizes funds when needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Some funds used for lab costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− $3,500 awarded</td>
<td></td>
<td></td>
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<tr>
<td>• New Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o Interlink Pathways</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− $260,000 received in one year and nine months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− Staff funding for navigators positions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o First 5 Targeted at Risk Home Visiting Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>− RFP pending – should be released soon</td>
<td></td>
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</tr>
</tbody>
</table>
### AGENDA ITEM

#### DISCUSSION

- Hope to have funds released soon by the state
- Expected to be in form of new RFPs and renewals

#### B. Update on Research Institute Studies

Utilizing the presentation included as Addendum E of the agenda packet, Melissa Wallace presented an update on new and ongoing clinical trials coordinated through the Research Institute, with additional comments noted below

- Confidentiality precludes discussing specifics of clinical trials
- 4 new IRC clinical trials approved Q4 FY11
- 10 new IRC clinical trials approved Q1 FY12
- Impact to PMC – new patients into the system who normally would not be at our facility
- Continuously looking to improve administrative side of clinical review process

#### C. Management Services Agreement with Palomar Pomerado Health (PPH)

- Tim Nguyen, Corporate Controller for PPH, requested potential payment for services rendered by PPH Finance Department staff to Health Development
  - A significant amount of staff time is being utilized
  - $2,000 per month retroactive to July was requested

**MOTION:** By Director Hemker, seconded by Director Covert and carried to approve $2000 per month payment retroactive to July for services rendered by staff. All in favor. None opposed.

- Director Krider requested that this item be revisited at the next meeting for discussion of an increase in the amount paid, to reflect actual costs incurred

#### D. Grant Proposal Update

**CALTRANS/SANDAG TRANSPORTATION GRANT FOR THE WOUND CARE CLINICS**

- Michael Covert, CEO, provided an update in the absence of Ms. Moore
  - Two wheelchair accessible vans have been requested
  - PPH has made the approved list for submission to Caltrans Programming for inclusion with grant request to the Federal Transit Administration
    - Tentative amount of grant would be a total of $120,000

**Information Only**

#### E. Grant Activity Updates

**CENTER FOR NURSING EXCELLENCE**

- Dr. Brenda Fischer, Director, Center for Nursing Excellence, introduced two guests – Polina Pavlova and Sarah Manning, seniors at CSUSM and BSN leadership students

**Information only**
## AGENDA ITEM

- **DISCUSSION**

**CONCLUSIONS/ACTION**

<table>
<thead>
<tr>
<th>FOLLOW-UP/ RESP. PARTY</th>
</tr>
</thead>
</table>

### ARCHSTONE FOUNDATION GRANT

- Screening tools have been built into Clarity
- Hoping to grow program
- Grant is used to provide spiritual care services to critically ill patients
- $200,000 has been awarded
- Demonstration project with 9 Southern California Healthcare Organizations
- Two-year program
- Funds 3 part-time roles of NP, BCC, MSW

### TRANSITIONS INTO PRACTICE I

- Residency program for 30 senior CSUSM BSN Students
- One-year program based on Quality and Safety Education Competencies for Nursing
- $268,000 from the San Diego Workforce Partnership
- Presentation at California Institute for Nursing and Health Care “Magic in Teaching” Conference

### TRANSITIONS INTO PRACTICE II

- Residency Program for 15 Senior CSUSM BSN Students
- Program based on Quality and Safety Education Competencies for Nursing
- $75,000 from the San Diego Workforce Partnership
- Presentation at California Institute for Nursing and Health Care “Magic in Teaching” Conference

### LS-1 STUDY TERMINATION

- ICU in a Suitcase
- Device vetted by staff
- Device found not to be up to our standards and grant participation terminated
- MOU terminated

### INTERLINK PATHWAYS & WEST FOUNDATION GRANT

- Utilizing the presentation included in the agenda packet as Addendum H, Leslie Solomon, Manager, Organizational Learning, provided an update
  - Gary and Mary West Foundation
  - Next Steps – Establish baseline and targets
  - Program concentrated on how to keep young adults 16-24 focused on medical career paths and potential future staff for the organization
AGENDA ITEM

I.A DISCUSSION

- Hopefully they will pursue their education locally
- HR maintains contact and provides supportive services
- Retention information is being gathered

CONCLUSIONS/ACTION

FOLLOW-UP/RESP. PARTY

VII. INFORMATION ITEMS

A. None

VIII. BOARD MEMBER COMMENTS/FUTURE AGENDA ITEMS

B. None

IX. FINAL ADJOURNMENT

The meeting was adjourned by Acting Chairperson Krider at 1:15 p.m.

SIGNATURES:

Acting Chairperson

Bruce Krider

Assistant to the CEO

Nancy Wood

Next Meeting: Annual Organizational Meeting – Friday, January 13, 2012 – 12:00-2:00 p.m. – Grand Conference Room
## Income Statement Summary

### Health Development

<table>
<thead>
<tr>
<th></th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>Budget Variance YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td>93,795</td>
<td>73,783</td>
<td>20,012</td>
</tr>
<tr>
<td>Expenses</td>
<td>8,187</td>
<td>13,700</td>
<td>5,513</td>
</tr>
<tr>
<td>Net Income/Loss</td>
<td>85,608</td>
<td>60,083</td>
<td>25,525</td>
</tr>
</tbody>
</table>

### Research Institute

<table>
<thead>
<tr>
<th></th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>Budget Variance YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td>197,029</td>
<td>8,333</td>
<td>188,696</td>
</tr>
<tr>
<td>Expenses</td>
<td>151,685</td>
<td>96</td>
<td>(151,589)</td>
</tr>
<tr>
<td>Net Income/Loss</td>
<td>45,344</td>
<td>8,237</td>
<td>37,107</td>
</tr>
</tbody>
</table>
Health Development
FY 2012 YTD Indirect Revenue Sources

HD Indirect Revenue

- MAA
- United Way
- HDS
- Green Oaks Ranch
- West Foundation
Health Development & Research Institute
Financial Trend
FY’ 2006-2012

HD/RI Revenue
HD/RI Expense
ADDENDUM C
Grant Update

JANUARY 13, 2012
<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTEE</th>
<th>Purpose</th>
<th>Awarded</th>
<th>Remaining Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bioterrorism/ Emergency Preparedness</td>
<td>County of San Diego, Health &amp; Human Agency</td>
<td>To enhance San Diego's Emergency Preparedness by utilizing HPP funding to purchase priority equipment and supplies including evacuation equipment, interoperable communications equipment, and surge capacity for pandemic influenza and fatality mgmt.</td>
<td>$1,040,480 Total over 12 years.</td>
<td>$433,533</td>
<td>5/25/05-6/30/18</td>
<td>N/A</td>
</tr>
<tr>
<td>Green Oaks Ranch</td>
<td>Physical Health Services for CANN</td>
<td>Provides an intake center for assessment and placement of abused, neglected, and/or abandoned children taken into immediate protective custody by Law Enforcement Officers and/or Health &amp; Human Services Agency Social Workers.</td>
<td>$835,000 ($167,000 per year)</td>
<td>$101,609</td>
<td>7/12/07-6/30/12</td>
<td>Possible renewal</td>
</tr>
<tr>
<td>MAA (Medical Administrative Activities)</td>
<td>County of San Diego Health &amp; Human Services Agency</td>
<td>Medi-Cal Administrative Activities (MAA) is a government program available to PPH to recover some of the administrative costs associated with providing Medi-Cal services.</td>
<td>Approx. $200,000 Annually</td>
<td>Approx. $250,000</td>
<td>N/A</td>
<td>Q4 FY10 and Q1 FY11 were submitted on 11/14/2011. Q2-Q4 FY11 will be invoiced in January.</td>
</tr>
</tbody>
</table>

County is planning to extend the current agreement using the 6 month extension language in the current contract. The estimated release date of the new RFP is May/June 2012.
<table>
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<tr>
<th>TITLE</th>
<th>GRANTEE</th>
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<th>Remaining Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marjorie Mosher Schmidt Foundation - Child Abuse Program</td>
<td>Marjorie Mosher Schmidt Foundation</td>
<td>To provide funds for interior of SART/Child Abuse Program building to be painted and flooring.</td>
<td>$22,000</td>
<td>$0</td>
<td>12/14/09-n/a</td>
<td>Received an additional $5,000 in Dec 11</td>
</tr>
<tr>
<td>National Children's Alliance (NCA)</td>
<td>National Children's Alliance (NCA)</td>
<td>Having met standards set for Child Advocacy Centers, PPH is an accredited member of the NCA. As a member of the NCA, PPH receives a grant of $10,000 annually to provide continued support for the cost of a bilingual interviewer in PPH's Child Abuse Program.</td>
<td>$10,000 Annually</td>
<td>$5,000</td>
<td>1/1/04-12/31/13</td>
<td>N/A</td>
</tr>
<tr>
<td>Parker -North County Project</td>
<td>Vaughn Parker Foundation</td>
<td>Donation through Foundation to provide additional funding for breast cancer diagnostic services to men and women 20-50 who fall between the gaps in the medical system, whether by income level, ethnicity, age, citizenship, or lack of insurance.</td>
<td>$50,902.60</td>
<td>$0</td>
<td>7/1/08-n/a</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## Health Development Current Grants

<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTEE</th>
<th>Purpose</th>
<th>Awarded</th>
<th>Remaining Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Way - Forensic Interviewing</td>
<td>United Way</td>
<td>To expand the availability of specialized child forensic interviews for children and youths who may be victims of child sexual abuse who would benefit from specialized child interview thus reducing the secondary trauma associated with multiple, duplicative interviews and increasing accuracy</td>
<td>$106,376</td>
<td>$0</td>
<td>12/1/08-6/30/12</td>
<td>An extension was granted to provide services through 6/30/12 or until funding runs out, whichever comes first.</td>
</tr>
<tr>
<td>Healthy Development Services (HDS)</td>
<td>First 5 Commission</td>
<td>To serve as lead agency for the North Inland Region to provide integrated care and treatment services that address the health, developmental and behavioral needs of children ages birth through 5 years</td>
<td>$8,760,000 ($1,752,000 annually)</td>
<td>$6,396,082</td>
<td>07/01/10-06/30/15</td>
<td>N/A</td>
</tr>
<tr>
<td>Palliative/Spiritual Care Grant</td>
<td>Archstone Foundation</td>
<td>To improve the quality of spiritual care provided by the trans-disciplinary team to the critically ill patients in the medical-surgical intensive care units at Palomar Medical Center. The overall goal of the project is to put into practice the Inpatient Spiritual Care Implementation Model with an emphasis on identifying and treating spiritual distress the same as any other medical issue.</td>
<td>$200,000</td>
<td>$110,000</td>
<td>10/1/10-9/30/12</td>
<td>N/A</td>
</tr>
<tr>
<td>TITLE</td>
<td>GRANTEE</td>
<td>Purpose</td>
<td>Awarded</td>
<td>Remaining Funds Receivable</td>
<td>Beg/End Date</td>
<td>Update</td>
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<td>------------------------------------------------</td>
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</tr>
<tr>
<td>In-n-Out - Child Abuse Program</td>
<td>In-N-Out Child Abuse Foundation</td>
<td>To provide funding for SART/Child Abuse Program community education and bilingual interviewing at the center. Funds to be used to reimburse PPH lab for the costs of some tests that sometimes need to be run on children that are not covered in the fee agreement with law enforcement.</td>
<td>$10,000</td>
<td>$0</td>
<td>N/A</td>
<td>Received $6,500 in Dec 2011.</td>
</tr>
<tr>
<td>Clinical Investigator Research Grant Program</td>
<td>San Diego Chapter of the American Association of Critical Care Nurses (SDAACN)</td>
<td>To Create, Coordinate &amp; Conduct the research study &quot;Undiagnosed Prediabetes &amp; Diabetes in the ED - A Missed Opportunity for Early Referral and Treatment.&quot;</td>
<td>$2,500</td>
<td>$0</td>
<td>4/15/11-11/15/12</td>
<td>N/A</td>
</tr>
<tr>
<td>Interlink Pathways (GO-MED)</td>
<td>West Foundation</td>
<td>Staff funding for navigators positions</td>
<td>$260,000</td>
<td>$111,950</td>
<td>8/1/11-4/30/13</td>
<td>N/A</td>
</tr>
<tr>
<td>TITLE</td>
<td>GRANTEE</td>
<td>Purpose</td>
<td>Awarded</td>
<td>Remaining Funds Receivable</td>
<td>Beg/End Date</td>
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</tr>
<tr>
<td>Transitions into Practice 2</td>
<td>San Diego Workforce Partnership</td>
<td>To provide a transition from education to practice through a residency program for Bachelor of Science in Nursing (BSN) students in their last year prior to graduation. It will be a collaborative partnership between CSUSM and PPH. The focus of the program is to provide a bridge to clinical practice and enhance employment opportunities for CSUSM BSN graduates.</td>
<td>$75,000</td>
<td>$75,000</td>
<td>1/1/12-10/31/12</td>
<td></td>
</tr>
<tr>
<td>California Transportation Commission</td>
<td>Caltrans / Regional Transportation Planning Agency (RTPA)</td>
<td>Purchase of two wheelchair accessible vans to improve senior and disabled patient access to medical care at both Palomar Pomerado Health Wound Care Centers (PPHWCC).</td>
<td>$120,000</td>
<td>$120,000</td>
<td>TBD</td>
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</table>
# Health Development

## Pending Grants

<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTEE</th>
<th>Purpose</th>
<th>Awarded</th>
<th>Remaining Funds Receivable</th>
<th>Beg/End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>First 5 Targeted At Risk Home Visiting Program</td>
<td>First 5 Commission</td>
<td>Targeted At Risk Home Visiting Program</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>Healthcare Innovation Challenge</td>
<td>Centers for Medicare &amp; Medicaid Services (CMS)</td>
<td>To fund applicants who propose compelling new models of service delivery/payment improvements that hold the promise of delivering the three-part aim of better health, better health care, and lower costs through improved quality for Medicare, Medicaid, and Children’s Health Insurance Program (CHIP) enrollees.</td>
<td>Awards will range from approximately $1 million to $30 million for a three-year period.</td>
<td>TBD</td>
<td>TBD</td>
</tr>
</tbody>
</table>

Anticipated Award Date: March 30, 2012
ADDENDUM D
The Future of Nursing: Campaign for Action
Research Proposal
Narrative Template

Identifying Information

**Project Title:** From Collaborative Track to Transition into Practice: A Partner Intervention Connecting Academics and Service

**Proposal I.D.:** 7914

**Applicant Name:** Denise M. Boren, PhD, RN

**Legal Name of Applicant Organization:** University Auxiliary and Research Services Corporation

Proposal Narrative Categories

Research Questions

Project aims: (1) Describe the retention rate, NCLEX pass rate, and student satisfaction with nursing courses and the collaborative track program; (2) Compare critical thinking, professionalism, clinical decision making and student satisfaction upon completion of ADN and BSN phases of the collaborative track; (3) Compare critical thinking, professionalism, clinical decision making, competency, NCLEX pass rates and student satisfaction between collaborative track, traditional and accelerated BSN students; (4) Describe satisfaction, performance, competency, experiences, and perceived strengths and limitations of the nurse residency program; (5) Compare satisfaction, experiences, and perceived strengths and limitations of the nurse residency program between collaborative track, traditional and accelerated BSN students; (6) Describe the retention rate, satisfaction with professional work environment, graduate nurse experience, and employer satisfaction at one year of employment; and (7) Compare the retention rate, work satisfaction, graduate nurse experience, and employer satisfaction at one year of employment between collaborative track, traditional and Accelerated BSN nurses completing the nurse residency program.

This project relates to two recommendations of the Institute of Medicine’s report on the Future of Nursing: increase the proportion of nurses with a baccalaureate degree to 80% by 2020 and implement nurse residency programs. The project aims describe the evaluation of the implementation of a collaborative track between two public community colleges and a public university, a nurse residency at a partner health care organization that is embedded in the
project and the graduates after one year in the work force. The project compares selected variables between student participants in the collaborative track with students in traditional and accelerated BSN programs. Selected variables and qualitative findings regarding the nurse residency program will be compared between students in the collaborative track, and those in the traditional and accelerated BSN who have completed the nurse residency program.

The project is innovative and significant as it promotes a partnership between the two public community colleges and a public university in North County San Diego, and the only “Magnet” recognized health care organization in this region. The collaborative track is a unique pathway for students in an associate nursing program to seamlessly transition into a baccalaureate program. The proposed collaborative track is three years in length. Students will begin their nursing education at the community college (2 year programs), attend the university to take prerequisite courses during the summers, and then seamlessly move into the bachelors program after completion of the ADN degree. The students will attend the university full-time to complete the BSN degree in one full year. Another unique component of this project is that the nurse residency will be embedded into the BSN curriculum for the collaborative track. In addition to the nursing courses, students will be in a nurse residency program for the full year they are completing the BSN degree. Because students will not take the NCLEX until they achieve their BSN, the nurse residency will ensure skills are kept current and knowledge is enhanced for the NCLEX, and placement into the workforce is seamless. Students will spend time in both the medical-surgical and specialty areas during the nurse residency. Simulation and standardized patients will be used throughout the program, both for experiential learning and for competency evaluation using scenarios and unfolding cases focusing on safe, quality care of patients (QSEN). Following graduation and passing NCLEX, students will be hired by the partner health care organization.

The proposed length of the project is 48 months. This includes the three years students are in a collaborative track and one year in the workforce.

The proposed budget is $2.5 million for four partnering organizations over four years and includes funding for student tuition costs and stipends for the Nurse Residency Program,
project coordination across the four sites, faculty, educator and preceptor compensation, simulation coordination, statistical assistance, administrative assistance, lab and simulation supplies, and research instrument costs.

**Proposed Methodology**

**Design:** The project will use a descriptive, comparative design using mixed methods.

**Theoretical/conceptual framework:** The conceptual framework used will be the Dreyfus Skills Acquisition Model as described by Benner (1984) in *From Novice to Expert*. In this study, the term “skills and skilled practices” integrates nursing interventions and clinical judgment or the “applied skill of nursing in actual clinical situations” (p.14). In addition, the curriculum will be designed based on recommendations in Benner’s (2010), *Educating Nurses: A Call for Radical Transformation*. This includes integrating unfolding cases, experiential learning and other opportunities for students to “make the connections between acquiring and using knowledge” (p.94).

**Sample:** The total sample of students is expected to be 283. Thirty students will be enrolled into the collaborative track each year. Of those students, 120 ADN’s in the collaborative track are expected to complete phase I (baseline) and phase 2, 90 of those students are expected to complete phase 3 data collection, 60 of those students are expected to complete phase 4 of data collection along with 60 traditional BSN students and 60 accelerated BSN students. In addition, 43 nurses who completed the residency program from traditional and accelerated BSN cohorts who graduated in 2011 will be included in the study. In phase 5 data collection, 30 collaborative track and 43 traditional and accelerated BSN graduates are expected to participate in the study.

**Settings:** The settings for the project includes three nursing schools, two located at public community colleges and one at a public university, and a “Magnet” recognized health care organization. The nursing schools and the health care organization are all located in North County San Diego.

**Data collection:** Data will be collected in five phases: prior to beginning the ADN program (phase 1), at completion of each year of the ADN portion of the collaborative track (phase 2 and...
3), at completion of the BSN portion of the collaborative track and nurse residency program (phase 4), and following one year in the workforce (phase 5). Data that will be collected at phase 1 includes critical thinking, professionalism and clinical decision making. Phase 2 and 3 data includes retention, student satisfaction, critical thinking, professionalism, clinical decision making and competency. Data collection at phase 4 will include retention, NCLEX pass rates, student satisfaction, critical thinking, professionalism, and competency. In addition, students in the collaborative track will participate in a focus group to collect data on satisfaction, experiences, strengths and limitations of the nurse residency program. Data collected from focus groups of 43 traditional and accelerated BSN students will be used for comparison. During phase 5, data that will be collected includes retention, critical thinking, professionalism, competency, graduate nurse experience, and satisfaction with the professional work environment.

**Measurement:** Measurement will include tracking retention and NCLEX pass rates. Student satisfaction will be measured using the University School of Nursing tool and competency will be measured using QSEN competencies (KSA’s) for pre-licensure and for graduates. To measure critical thinking, Facione, Facione and Giancarlo's (2001, 2002) California Critical Thinking Disposition Inventory (CCTDI) and the California Critical thinking Skills Test (CCTST) will be used. Hall’s Professionalism Scale (1968; 1972) will be used to measure professionalism. The Clinical Decision Making in Nursing Scale (Jenson, 2001) will be used for measurement of clinical decision making. The Casey-Fink Graduate Nurse Experience Survey (2002) will be used to measure the new nurse experience with professional transition into the work force. The Revised Nursing Work Index (2000) will be used to measure satisfaction with the professional work environment. Tools are reliable and valid. In addition, qualitative data about student satisfaction, experiences and strengths and limitations of the residency program will be coded using Atlas TI and salient themes identified through qualitative analysis methods.

**Plan for statistical analysis:** Descriptive statistics will be used for analyzing Phase 1 data – Critical Thinking (CCTDI and CCTST), professionalism (Hall’s Professionalism Scale), and clinical decision making (Clinical Decision Making Scale). Phase 2 and 3 data will be analyzed...
using descriptive statistics – retention, student satisfaction, competency, critical thinking, professionalism, and clinical decision making. Phase 4 data will be analyzed using descriptive statistics and inferential statistics (ANOVA) for evaluating differences between groups (retention and NCLEX pass rates, student satisfaction, competency, critical thinking, professionalism, and clinical decision making). Phase 5 will be analyzed using descriptive statistics – retention, competency, critical thinking, professionalism, clinical decision making, nurse experience (Casey-Fink Graduate Nurse Experience Survey), and satisfaction with the professional work environment (Revised Nursing Work Index).

Team
The team will include the following: (1) the directors of the three Schools of Nursing – one will serve as the Project Director/Principle Investigator and the two others will serve as co-investigators and coordinators for the collaborative track; (2) the Director for Nursing Excellence at the health care organization will serve as the co-Project Director and co-investigator, and coordinate the nurse residency program and the new graduates that are hired. A faculty member from the University School of Nursing will serve as the liaison/coordinator for the entire project. The Nursing Simulation Director from the University School of Nursing will lead the development of simulation or standardized patient scenarios and coordinate the competency evaluation.

Dissemination
The team will collaborate on dissemination methodology including publishing articles in refereed journals and presentations at national, regional and local conferences. Nursing organizations, health care agencies and nurses in education and practice will be interested in the findings of this study.

Risks and Challenges
The most challenging element of the study is communication among the key team members. Frequent meetings and a liaison will help mitigate this concern. The co-investigators will promote and expedite IRB review and approval.