

**BOARD OF DIRECTORS**

**REGULAR MEETING**

**Palomar Health**
1st Floor Conference Room
456 E. Grand Avenue, Escondido, CA

_Dinner provided for Board members & invited guests_

**Time** | **Page** | **Target**
---|---|---
6:00 | 6:15 |

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_

III. INFORMATION ITEMS

IV. OLD BUSINESS

A. Prior Meeting Action Items

V. MINUTES

*A. Tuesday, March 1, 2016 (Addendum A – Pp17-23)*

VI. PRESENTATIONS

A. First 5 Commission Funded Programs at Palomar Health
   Healthy Development Services
   **First Steps**
   Cindy Linder
   Shirin Strauss
   (Addendum B – Pp24-44)

B. Update on Grants & Contracts Inventory and Proposals
   Aimee Ebner & Jeremy Lee

VII. NEW BUSINESS

*A. Updated Physician Agreement Procedure (Addendum E – Pp67-69)*
   Tanya Howell
   6:20

*B. Medical Director for First 5 First Steps – Byron Chow, MD*
   Shirin Strauss
   6:23

*C. Medical Director for First 5 Healthy Development Services*
   Cindy Linder
   6:45

*D. YTD Financial Report (Addendum F – Pp70-75)*
   Aimee Ebner
   7:00

*E. Operating Budgets – Palomar Health Development & the Research Institute*
   Aimee Ebner
   7:20

*F Resolution No. 10.25.16(05)-1 – Setting the Date, Time & Location for the Annual Organizational Meeting for Calendar Year 2017*
   Aimee Ebner
   7:25

VIII BOARD MEMBER COMMENTS/FUTURE AGENDA ITEMS

IX. FINAL ADJOURNMENT

Next Regular Meeting: TBD

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**Palomar Health Development, Inc., Board of Directors**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dara Czerwonka, MSW, Chairperson</td>
<td>Jeff Griffith, EMT-P, Vice-Chairperson</td>
</tr>
<tr>
<td>Bob Hemker, Director</td>
<td>Diane Hansen, Treasurer</td>
</tr>
</tbody>
</table>

If you have a disability, please contact us 72 hours prior to scheduled meeting time by calling 760-740-6383 to arrange reasonable accommodations

* Asterisks indicate anticipated action; action is not limited to those designated items
Prior Meeting Action Items

TO: Palomar Health Development Board
MEETING DATE: Tuesday, October 25, 2016
FROM: Tanya Howell, Corporate Secretary

Background: The attached Prior Meeting Action Items listing was implemented as a means of tracking topics that require follow-up at future meetings. All items have been completed.

Budget Impact: N/A

STAFF RECOMMENDATION:
Motion:
Individual Action:
Information: X
Required Time:
1) 3/1/16: Board Officers
   a) Secretary Howell will insert the names of the officers into the Resolution; will ensure this information is disseminated to staff; and will update the PHD page on the PH web site – **Done**

2) 3/1/16: Corporate Officers
   a) Secretary Howell will insert the names of the officers into the Resolution; will ensure this information is disseminated to staff; and will update the PHD page on the PH web site – **Done**

3) 3/1/16: Second Meeting for Calendar Year 2016
   a) Secretary Howell is to insert the appropriate date and time into the Resolution, then will post the final, signed Resolution on the PHD page of the PH web site – **Done**

4) 3/1/16: Second Amended Line of Credit Agreement
   a) Secretary Howell is to ensure that the agreement is fully executed and distributed to appropriate PH and PHD staff – **Done**
TO: Palomar Health Development Board

MEETING DATE: Tuesday, January 27, 2015

FROM: Tanya Howell, Corporate Secretary

Background: The minutes of the Annual Organizational Meeting held on Tuesday, March 1, 2016, are respectfully submitted for approval (Addendum A).

Budget Impact: N/A

STAFF RECOMMENDATION: Approval of the Tuesday, March 1, 2016, Annual Organizational Meeting minutes.

Motion: X

Individual Action:

Information:

Required Time:
First 5 Commission Funded Programs
At Palomar Health

TO: Palomar Health Development Board

MEETING DATE: Tuesday, October 25, 2016

FROM: Cindy Linder, RN, BSN, North Inland Regional Coordinator, HDS
       Shirin Strauss, MA, ICCE, IBCLC, Program Director North Region First Steps

Background: The First 5 Commission of San Diego funds two programs at Palomar Health: Healthy Development Services (HDS) and First Steps.

Information about both of these programs and the progress that is being made to help the children of North San Diego County will be presented (Addendum B).

Budget Impact: None

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
Palomar Health Development, Inc.
Update on Grants

TO: Palomar Health Development Board
MEETING DATE: Tuesday, October 25, 2016
FROM: Diane Hansen, Chief Financial Officer

Background: Aimee Ebner, with the assistance of Jeremy Lee regarding grants related to the Palomar Health pharmacy (Addendum C), will update the Board on all the grants managed by Health Development (Addendum D).

Budget Impact: None.

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
Recommended Procedure for
Board Approval of Physician Agreements

TO: Health Development Board

MEETING DATE: Tuesday, October 25, 2016

BY: Diane Hansen, Chief Financial Officer

Background: As a means of streamlining the approval process for Budgeted Routine Physician Agreements, in 2012 the Palomar Health Board approved a revision to that process, removing the requirement for pre-approval by the Board. In lieu of approval prior to execution, all Budgeted Routine Physician Agreements were allowed to be executed, and those that became effective during the previous month were presented as an informational update through the Palomar Health Board Finance Committee. That update was to include the standard Form A and Abstract Table as background for each signed Agreement being presented.

At the January 13, 2012, Health Development Board meeting, a similar procedure was established for Physician Agreements.

The Palomar Health Board Finance Committee has since requested that the Physician Approval procedure be edited, changing the informational report to an actionable item, both by that Committee and the Palomar Health Board.

As the original Health Development Procedure was drafted to mirror that of Palomar Health, the attached Procedure (Addendum E) has been edited to require Health Development Board approval of Physician Agreements. It has also been edited to reflect the name change to Palomar Health Development, Inc.

Budget Impact: N/A

Staff Recommendation: Staff recommends adoption of the updated Procedure for Board Approval of Physician Agreements, which now requires Board approval following execution of the Agreement.

Motion: X

Individual Action:

Information:

Required Time:
TO: Palomar Health Development Board

MEETING DATE: Tuesday, October 25, 2016

FROM: Shirin Strauss, M.A., ICCE, IBCLC
       Program Director, First 5 First Steps
       Virginia Barragan, Director, First 5 First Steps

Background: The contract agreement is for consultation (chart review) by Byron Chow, MD, as Medical Director for our Palomar Health First 5 First Steps Home Visiting Program (he is not providing direct services). Consultation includes: Chart review in person and by telephone; participation in First Steps Advisory Board; and other meetings as applicable. (NOTE: Dr. Chow is also the medical director for our First 5 funded HDS program.)

Budget Impact: First Steps has budgeted for this contractual agreement. The First 5 Commission of San Diego (our funder) has approved the use of grant funding for these consultant services. In addition, they are considering replicating this innovative, strategic utilization of a local physician as Medical Director/Consultant in all First Steps programs county-wide.

STAFF RECOMMENDATION: Approval of the First Steps Medical Director Contract Agreement with Byron Chow, MD.

Motion: X

Individual Action:

Information:

Required Time:
### PALOMAR HEALTH DEVELOPMENT, INC. – AGREEMENT ABSTRACT

<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></td>
<td>Contract Agreement. First Steps Medical Director</td>
</tr>
<tr>
<td><strong>PARTIES</strong></td>
<td></td>
<td>Palomar Health First 5 First Steps Program and Byron Chow, M.D.</td>
</tr>
<tr>
<td><strong>PURPOSE</strong></td>
<td></td>
<td>For his services as First Steps Medical Director (consultation only, no direct services).</td>
</tr>
<tr>
<td><strong>SCOPE OF SERVICES</strong></td>
<td></td>
<td>In-person or telephone consultation and chart review. Participation in First Steps Advisory Board, The North County Home Visiting Collaborative developed by First Steps, and other meetings as applicable.</td>
</tr>
<tr>
<td><strong>PROCUREMENT METHOD</strong></td>
<td></td>
<td>☐ Request For Proposal  ☒ Discretionary</td>
</tr>
<tr>
<td><strong>TERM</strong></td>
<td></td>
<td>July 1, 2016 – June 30, 2017</td>
</tr>
<tr>
<td><strong>RENEWAL</strong></td>
<td></td>
<td>Written annual renewal until suspension of program (5 years of initial/current funding and probability for second 5-year term).</td>
</tr>
<tr>
<td><strong>TERMINATION</strong></td>
<td></td>
<td>Evergreen contract, with review and written renewal at one-year intervals</td>
</tr>
<tr>
<td><strong>COMPENSATION METHODOLOGY</strong></td>
<td></td>
<td>Hourly</td>
</tr>
<tr>
<td><strong>BUDGETED</strong></td>
<td>☒ YES ☐ NO – IMPACT:</td>
<td></td>
</tr>
<tr>
<td><strong>EXCLUSIVITY</strong></td>
<td>☒ NO ☐ YES – EXPLAIN:</td>
<td></td>
</tr>
<tr>
<td><strong>JUSTIFICATION</strong></td>
<td></td>
<td>To be sure our families are not medically too high risk for our program, and to identify the need for physician referrals as applicable.</td>
</tr>
<tr>
<td><strong>AGREEMENT NOTICED</strong></td>
<td>☐ YES ☐ NO</td>
<td>Methodology &amp; Response:</td>
</tr>
<tr>
<td><strong>ALTERNATIVES/IMPACT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Duties</strong></td>
<td>☐ Provision for Staff Education  ☐ Provision for Medical Staff Education  ☐ Provision for participation in Quality Improvement  ☐ Provision for participation in budget process development</td>
<td></td>
</tr>
<tr>
<td><strong>COMMENTS</strong></td>
<td></td>
<td>We are pleased to have the opportunity to work with Dr. Chow for another year as Medical Director for First Steps. He is also again Medical Director for HDS.</td>
</tr>
<tr>
<td><strong>APPROVALS REQUIRED</strong></td>
<td></td>
<td>☐ VP ☐ CFO ☐ CEO ☐ BOD Committee ☐ BOD</td>
</tr>
</tbody>
</table>
Medical Directorship for First 5 Healthy Development Services

TO: Palomar Health Development Board

MEETING DATE: Tuesday, October 25, 2016

FROM: Cindy Linder, North Inland Regional Coordinator, HDS

Background: 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, automatically went into effect on January 1, 2016. The abstract table for the extension is attached.

An updated FMV has been completed, it has not changed, and Management has determined that the automatic rollover of the agreement was appropriate.

Budget Impact: Within the current HDS budget with First 5.

STAFF RECOMMENDATION: Approval of the HDS Medical Director Agreement with Byron Chow, M.D.

Motion: X

Individual Action:

Information:

Required Time:
<table>
<thead>
<tr>
<th>Section Reference</th>
<th>Term/Condition</th>
<th>Term/Condition Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>TITLE</td>
<td>First 5 Healthy Development Services (HDS) Medical Director</td>
<td></td>
</tr>
<tr>
<td>AGREEMENT DATE</td>
<td>January 1, 2011; amendment effective January 1, 2014</td>
<td></td>
</tr>
<tr>
<td>PARTIES</td>
<td>Byron Chow, MD</td>
<td></td>
</tr>
<tr>
<td>PURPOSE</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

<table>
<thead>
<tr>
<th>5.1 NEW TERM</th>
<th>January 1, 2016 – December 31, 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>RENEWAL</td>
<td>Auto-renewal for one-year terms</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>5.2 5.3 TERMINATION</th>
<th>Not less than 30 days of written notice without cause</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Immediately for cause</td>
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</tbody>
</table>

**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:

<table>
<thead>
<tr>
<th>ALTERNATIVES/IMPACT</th>
<th>Provision for Staff Education</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Provision for Medical Staff Education</td>
</tr>
<tr>
<td></td>
<td>Provision for participation in Quality Improvement</td>
</tr>
</tbody>
</table>

**Duties**

**COMMENTS**

**APPROVALS REQUIRED**

- ☒ Dept/Program Director ☐ Chief Financial Officer ☒ BOD
TO: Palomar Health Development Board

MEETING DATE: Tuesday, October 28, 2016

FROM: Diane Hansen, 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. Aimee Ebner will review the Health Development/Research Institute Fiscal Year 2016 Financial Reports (Addendum F).

Budget Impact: None.

STAFF RECOMMENDATION:

Motion:

Individual Action:

Information: X

Required Time:
TO: Palomar Health Development Board of Directors

MEETING DATE: Tuesday, October 25, 2016

FROM: Diane Hansen, Chief Financial Officer

Background: The FY2017 Operating Budgets for Palomar Health Development and the Research Institute were approved as part of Palomar Health’s budgeting process. An overview of the Budgets is attached.

Budget Impact: None.

Committee Questions:

STAFF RECOMMENDATION: Staff recommends approval of the FY2017 Operating Budgets for Palomar Health Development and the Research Institute.

Motion: X

Individual Action:

Information:

Required Time:
## FY2017 Budget

<table>
<thead>
<tr>
<th></th>
<th>Health Development</th>
<th>Research Institute</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td>305,571</td>
<td>10,150</td>
<td>315,721</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td>39,765</td>
<td>24,000</td>
<td>63,765</td>
</tr>
<tr>
<td><strong>Net Income/Loss From Operations</strong></td>
<td>265,806</td>
<td>(13,850)</td>
<td>251,956</td>
</tr>
<tr>
<td><strong>Interest Expense</strong></td>
<td>94,265</td>
<td>0</td>
<td>94,265</td>
</tr>
<tr>
<td><strong>Net Income/Loss</strong></td>
<td>171,541</td>
<td>(13,850)</td>
<td>157,691</td>
</tr>
</tbody>
</table>
Resolution No. 10.25.16(05)-1
Setting the Date, Time & Location for the Annual Organizational Meeting for Calendar Year 2017

TO: Palomar Health Development Board

MEETING DATE: Tuesday, October 25, 2016

FROM: Diane Hansen, Chief Financial Officer

Background: In accordance with the Bylaws of the Corporation, the date, time and location for the Annual Organizational Meeting for Calendar Year 2017 shall be set at this last meeting of Calendar Year 2016.

Potential dates and times that do not conflict with currently scheduled Palomar Health Board/Board Committee meetings are at 6:00 p.m. on either Wednesday, March 29, 2017, or Tuesday, April 4, 2017. The 1st Floor Conference Room at the Palomar Health administrative offices located at 456 E. Grand Avenue, Escondido, California, will be the recommended location for both potential dates.

Budget Impact: N/A

STAFF RECOMMENDATION: Approval of Resolution No. 10.25.16(05)-1 Setting the Date, Time & Location for the Annual Organizational Meeting for Calendar Year 2017, as amended to include the date and time chosen at this evening’s meeting.

Motion:

Individual Action: X

Information:

Required Time:
RESOLUTION NO. 10.25.16(05)-1

RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH DEVELOPMENT, INC.
ESTABLISHING THE DATE, TIME AND LOCATION FOR THE ANNUAL ORGANIZATIONAL MEETING FOR CALENDAR YEAR 2017

WHEREAS, Palomar Health Development, Inc. (“Corporation”) is required, pursuant to Section 54954 of the California Government Code and Section 4.03(a) of the Corporation’s Bylaws to pass a Resolution adopting the date, time and location of the Annual Organizational Meeting for the following calendar year;

NOW, THEREFORE, IT IS HEREBY RESOLVED by the Board of Directors of Corporation that the Annual Organizational Meeting for Calendar Year 2017 will be held at the date, time and location noted below:

<table>
<thead>
<tr>
<th>DATE/TIME</th>
<th>LOCATION</th>
</tr>
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<tbody>
<tr>
<td>TBD</td>
<td>Palomar Health 1st Floor Conference Room 456 E. Grand Avenue Escondido, CA 92025</td>
</tr>
</tbody>
</table>

PASSED AND ADOPTED at the meeting of the Board of Directors of Corporation, held on October 25, 2016, by the following vote:

AYES:
NOES:
ABSENT:
ABSTAINING:
DATED: October 25, 2016

APPROVED: ATTESTED:

Dara Czerwonka, MSW, Chairperson
Hans C. Sison, LVN, Secretary
Board of Directors
Board of Directors
Palomar Health Development, Inc.
Palomar Health Development, Inc.
## ADDENDUM A

### 2016 ATTENDANCE ROSTER

**BOARD OF DIRECTORS**

<table>
<thead>
<tr>
<th>MEMBERS</th>
<th>MEETING DATES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3/1/16</td>
</tr>
<tr>
<td>Dara Czerwonka, MSW – Chair</td>
<td>P</td>
</tr>
<tr>
<td>Jeff Griffith, EMT-P</td>
<td>P</td>
</tr>
<tr>
<td>Hans Sison, LVN</td>
<td>E</td>
</tr>
<tr>
<td>Bob Hemker</td>
<td>P</td>
</tr>
<tr>
<td>Diane Hansen, CPA</td>
<td>E</td>
</tr>
<tr>
<td><strong>Guest Presenters¹</strong></td>
<td></td>
</tr>
</tbody>
</table>

P = Present  E = Excused  A = Absent  C = Chair

¹ See text of minutes for names of invited guests/presenters
Tuesday, March 1, 2016
6:00 p.m.

BOARD OF DIRECTORS
MEETING MINUTES

TUESDAY, MARCH 1, 2016

(I.A) AGENDA ITEM

<table>
<thead>
<tr>
<th>DISCUSSION</th>
<th>CONCLUSIONS/ACTION</th>
<th>FOLLOW-UP/RESP PARTY</th>
</tr>
</thead>
</table>

I. CALL TO ORDER

- Chairperson Dara Czerwonka called the meeting to order at 6:00 p.m.
- Quorum comprised of Directors Czerwonka, Griffith and Hemker. Director’s Hansen and Sison were excused.
- Notice of Meeting and Full Agenda Packet were posted at PH’s Administrative Offices and on the Palomar Health Development, Inc. (PHD) home page on the PH web site on Tuesday, February 23, 2016, which is consistent with legal requirements. Notice of that posting was also made via email to the Board and staff members.

II. PUBLIC COMMENTS

- There were no public comments

VII. NEW BUSINESS*


MOTION: By Director Griffith, seconded by Director Hemker to approve Resolution No. 03.01.16(01)-1 – Authorizing Acceptance of the Independent Audit of the Annual Financial Report of Palomar Health Development, Inc., for Fiscal Year End 2015 as the Annual Report. Carried by the following vote, taken by roll call: Czerwonka, Griffith and Hemker.

- Ron Mitchell of the auditing firm AKT, LLP, presented the auditors finding via the reports attached as Addendum A in the agenda packet
- The Executive Summary on the first page (Pg 19 in the packet) provides a summary of the results of the audit
  - AKT rendered an unmodified auditor’s opinion, which is good
  - If a modified opinion had been rendered, it would have meant that changes had been required
  - AKT also found no material weaknesses in PHD’s internal controls
- The letters on Pages 20 through 22 are required to be in the audit report
- Summary of Uncorrected Misstatements (Pg 23)
  - Proposed Journal Entry #1 was tested a year after it happened, it technically should have been recognized in prior years and was not
    - Adjusted from revenue to net assets
    - Minor misstatement, but must be reported to the Board

*The first matter in §VII. New Business was taken out of order to accommodate the guest speaker
**BOAORD OF DIRECTORS – MEETING MINUTES – TUESDAY, MARCH 1, 2016**

(I.A) **AGENDA ITEM**

<table>
<thead>
<tr>
<th>DISCUSSION</th>
<th>CONCLUSIONS/ACTION</th>
<th>FOLLOW-UP/ RESP PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The Management Representation Letter <em>(Pp 24-25)</em> indicates PHD’s requirements as to the audit</td>
<td></td>
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<tr>
<td>• PHD is still economically dependent on Palomar Health, but the deficit is improving year over year <em>(Pg 29)</em></td>
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<td></td>
</tr>
<tr>
<td>o Can operate with the deficit due to the monies advanced by the district</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o PHD is making payments to Palomar <em>(Pg 32)</em></td>
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<tr>
<td>• Mr. Mitchell stated that there had been no real change in the audit from the prior year</td>
<td></td>
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</tbody>
</table>

**III. INFORMATION ITEMS**

| • Director Hemker stated that a conversations have been taking place to review the structure of the PHD Board, specifically with regard to who the board members should be for a 501(c)(3) corporation |
| • Another thread of that dialogue is whether it is the appropriate time to fold PHD into the Palomar Health Foundation |
| o When first organized, the grants were a combined function of the Foundation, then that function was separated into the separate corporation of PHD for a certain business purpose |
| • Should the Board agree administratively to entertain conversations, management will review what the proposal would mean in terms of logistics, whether the two entities would formally merge, whether it would mean the replacement of board members, etc. |
| o Director Hemker stated that this Board needs to be comfortable with the direction before management gets too far down the due diligence path |
| o Jean Larsen, President and Chief Philanthropy Officer of the Foundation, stated that the Foundation Board is receptive to the conversation, noting that there are a lot of opportunities for future grants, and having the data housed at PHD would be useful in applying for them, especially since the Foundation recently hired a full-time grant writer |
| o Director Hemker stated that in his conversations with Director Hansen, one of the key pieces of due diligence is determining whether the First 5 grants are transferable to the Foundation |
| • The Board will be kept apprised as due diligence progresses |

**IV. OLD BUSINESS**

A. **PRIOR MEETING ACTION ITEMS**

| Information Only |
| • Secretary Howell stated that both items requiring follow-up action had been handled, and the information requested was contained in the packet |

**V. MINUTES – Regular Meeting, Monday, August 24, 2015**

MOTION: By Director Griffith, seconded by Director Hemker and carried to approve the minutes of the Regular Meeting of Monday, August 24, 2015. All in favor. None opposed.

| • No discussion |

**VI. PRESENTATIONS**

A. **Update on Grants & Contracts Inventory**

| Information Only |
| • Utilizing the presentation included in the agenda packet, staff member Aimee Ebner provided an update *(only discussion not in the packet was captured in the minutes)* |
| • CURRENT GRANTS |
| o Schwartz Center Rounds was on hiatus last year but has recently been reinstated |

*The first matter in §VII. New Business was taken out of order to accommodate the guest speaker*
### BOARD OF DIRECTORS – MEETING MINUTES – TUESDAY, MARCH 1, 2016

#### I.A AGENDA ITEM

<table>
<thead>
<tr>
<th>DISCUSSION</th>
<th>CONCLUSIONS/ACTION</th>
<th>FOLLOW-UP/ RESP PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>o The Green Oaks Ranch grant is based on a calendar year, not a fiscal year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>o The In-N-Out grant is an annual award whose amount varies, with the current $7,500 award being the highest received to date</td>
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</tbody>
</table>

### VII. NEW BUSINESS*

#### B. Resolution No. 03.01.16(02)-2 – Acknowledging Appointment of the New Board, Ratifying Appointment of the Chairperson, and Confirming Election of the Officers of the Board for Calendar Year 2016

**MOTION:** By Director Hemker, seconded by Director Griffith and carried to re-elect the current slate of other officers (Jeff Griffith, Vice-Chairperson; Hans Sison, Secretary; and Diane Hansen, Treasurer), as the Chair had already been appointed by the Palomar Health Board. All in favor, none opposed.

**MOTION:** By Director Hemker, seconded by Director Griffith to approve Resolution No. 03.01.16(02)-2 – Acknowledging Appointment of the New Board, Ratifying Appointment of the Chairperson, and Confirming Election of the Officers of the Board for Calendar Year 2016, after insertion of the newly elected officers. Carried by the following vote, taken by roll call: Czerwonka, Griffith and Hemker.

- Secretary Howell will insert the names of the officers into the Resolution; will ensure this information is disseminated to staff; and will update the PHD page on the PH web site.

#### C. Resolution No. 03.01.16(03)-3 – Confirming Appointment of Corporate Officers for Calendar Year 2016

**MOTION:** By Director Hemker, seconded by Director Griffith and carried to re-appoint the current slate of officers (Bob Hemker, President; Diane Hansen, Chief Financial Officer; Tanya Howell, Secretary).

**MOTION:** By Director Hemker, seconded by Director Griffith to approve Resolution No. 03.01.16(03)-3 – Confirming Appointment of Corporate Officers for Calendar Year 2016, after the names of the newly appointed officers have been inserted. Carried by the following vote, taken by roll call: Czerwonka, Griffith and Hemker.

- Secretary Howell will insert the names of the officers into the Resolution; will ensure this information is disseminated to staff; and will update the PHD page on the PH web site.

#### D. Resolution No. 03.01.16(04)-4 – Setting the Date, Time & Location for the Remaining Regular Meeting for Calendar Year 2016

**MOTION:** By Director Griffith, seconded by Director Hemker to approve Resolution No. 03.01.16(04)-4 – Setting the Date, Time & Location for the Remaining Regular Meeting for Calendar Year 2016, after it has been edited to include the date, time and location of Monday, August 29, 2016, at 6:00 p.m., in the 1st Floor Conference Room at the PH Administration Building, 456 E. Grand Avenue Escondido, California. Carried by the following vote, taken by roll call: Czerwonka, Griffith and Hemker.

- Secretary Howell is to insert the appropriate date and time into the Resolution, then will post the final, signed Resolution on the PHD page of the PH web site.

*The first matter in §VII. New Business was taken out of order to accommodate the guest speaker*
<table>
<thead>
<tr>
<th>AGENDA ITEM</th>
<th>CONCLUSIONS/ACTION</th>
<th>FOLLOW-UP/RESP PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DISCUSSION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Referencing Page 11, Secretary Howell stated there were two potential dates for the meeting: Monday, August 29, 2016, or Tuesday, August 30, 2016, with a recommended meeting start time on either date of 5:30 p.m., to be held in the 1st Floor Conference Room at the PH Administration Building, 456 E. Grand Avenue Escondido, California</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- She also noted that it was a 5th week in the month, so there were no other Palomar Health Board meetings that week</td>
<td></td>
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<tr>
<td>- The members of the Committee concluded that Monday, August 29, 2016, worked in all their calendars</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Chairperson Czerwonka requested that the meeting start time be pushed to 6:00 p.m.</td>
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</tr>
</tbody>
</table>

**E. YTD Financial Report**

MOTION: By Director Hemker, seconded by Director Griffith and carried to approve the January 2016 and YTD FY2016 Financial Report as presented. All in favor. None opposed.

Utilizing the presentation included in the agenda packet as Addendum E, Kristine Roberts presented the January 2016 and YTD FY16 financial report.

- **PALOMAR HEALTH DEVELOPMENT**
  - **REVENUE (YTD)**
    - $153K actual vs. a budget of $178K, a negative variance of $25K
      - 1) Variance is almost exclusively revenue from the indirect revenues from the First 5 Commission, as the staff are low on salaries YTD, but we usually see more at the end of year, so it should even out
  - **EXPENSES**
    - $75.3K actual vs. a budget of $75.7, a positive variance of almost $400
  - **NET INCOME/LOSS**
    - $77.9K actual vs. a budget of $103K, a negative variance of $25K
      - 1) Almost all due to the indirect revenue variance

- **RESEARCH INSTITUTE (RI)**
  - **REVENUE**
    - $9.7K actual vs. a budget of $13.8K, a negative variance of $4K
      - 1) These are protocol and research revenues, and there hasn’t been a lot of research activity
  - **EXPENSES**
    - $7K actual vs. a budget of $7K, a zero variance
      - 1) These are the administrative fees paid to Palomar Health
  - **NET INCOME/LOSS**
    - $2.7K actual vs. a budget of $6.8K, a negative variance of $4K
      - 1) Equal to the loss of protocol and research revenues

- **HISTORICAL FINANCIAL TREND**
  - This slide is proof that the direction in which we’ve taken PHD is the proper one

*The first matter in §VII. New Business was taken out of order to accommodate the guest speaker*
**BOAND OF DIRECTORS – MEETING MINUTES – TUESDAY, MARCH 1, 2016**

(I.A) **AGENDA ITEM**

- **DISCUSSION**
  - Biggest point is that in 2006 and 2007 expenses were higher than revenue, and that has changed significantly over time

- **INDIRECT REVENUE**
  - Indirect revenue is derived entirely from the two First 5 Commission grants
  - Total received for HDS YTD was $106,991
  - Total received for First Steps YTD was $46,076

- **F. 2nd Amended Line of Credit with Palomar Health**
  - **MOTION:** By Director Griffith, seconded by Director Hemker and carried to approve the 2nd Amended Line of Credit Agreement between Palomar Health and Palomar Health Development, Inc. All in favor. None opposed.
  - Secretary Howell is to ensure that the agreement is fully executed and distributed to appropriate PH and PHD staff
  - Secretary Howell stated that the Agreement was being amended to conform to actions already taken by the Palomar Health Board, to include:
    - Two line of credit increases
    - Removal of references to Advances and Notices of Borrowing, as all approved funds have been advanced
    - Enactment of a new Promissory Note to reflect the actual amount advanced
  - Chairperson Czerwonka also inquired about the extension of the Credit Line Expiration Date, and Secretary Howell indicated that was done as the original date had expired in January of this year, and Health Development was still making payments
    - Director Hemker noted that the outstanding amount on the LoC had been reduced to $2.8M at the audit date

- **F. Administrative Oversight for Palomar Health Development**
  - **MOTION:** By Director Hemker, seconded by Director Griffith and carried to allow the Management Services Agreement between Palomar Health and Palomar Health Development, Inc., to renew for another one-year term on July 31, 2016, with no change in compensation. All in favor. None opposed.
  - Director Hemker stated that this agreement was a chargeback for services provided by Palomar Health staff to the grants entity
    - It is a nominal sum, which has changed over the years based on conversations regarding the true cost of the services and what Health Development can afford
    - Staff have reaffirmed the ability to pay, and this agreement provides $2K for the services of PH staff on behalf of PHD, and $1K for the services of PH staff for oversight of the Research Institute’s programs and studies
    - It is scheduled to renew for another one-year term on July 31, 2016
    - Should a future review reveal a need to change the amount of compensation, an appropriate recommended amendment will be brought to the Board’s attention for review and approval

*The first matter in §VII. New Business was taken out of order to accommodate the guest speaker*
**VIII. BOARD MEMBER COMMENTS/FUTURE AGENDA ITEMS**

- Director Hemker stated that we need to ensure that the discussion regarding the possibility of moving PHD under the umbrella of the Palomar Health Foundation be made a formal agenda item for next time, noting that a special meeting of the Board would be called if needed before the August meeting

**IX. ADJOURNMENT**

**MOTION:** By Director Griffith, seconded by Director Hemker and carried to adjourn the meeting, which was adjourned by Chairperson Czerwonka at 6:38 p.m.

**SIGNATURES:**

<table>
<thead>
<tr>
<th>PHD Board Chair</th>
<th>Board Assistant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dara Czerwonka, MSW</td>
<td>Tanya Howell</td>
</tr>
</tbody>
</table>

**Next Meeting:** Regular Meeting – Monday, August 29, 2016, 6:00 p.m.; Location: 1st Floor Conference Room, 456 E. Grand Avenue, Escondido, CA
ADDENDUM B

Healthy Development Services (HDS)
Cindy Linder, RN, BSN

First 5 First Steps (First Steps)
Shirin Strauss, M.A., ICCE, IBCLC

Virginia Barragan, FACHE, PT, MOMT, DPT
Sheila Brown, RN, MBA, FACHE
October 25, 2016
Why the Early Years Matter

• How and how well we think, we learn, how well we control our emotions, how we relate to each other the rest of our lives, all of who we become as adults is deeply rooted in our early experiences and our early relationships.

• First 5 San Diego supports young families through a network of services prenatally and through the first 5 years of a child’s life.
First 5 Funding for Palomar Health

Funded by First 5 San Diego

Five Year Contract Term 2015-2020

- HDS - $9,440,625
- First Steps - $6,391,615

July 2016 - June 2017

- HDS - $1,943,540 (20 FTE)
- First Steps - $1,278,323 (15 FTE)
## San Diego Community Partners

<table>
<thead>
<tr>
<th>Category</th>
<th>Programs/Initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Providers</td>
<td>Community Clinics</td>
</tr>
<tr>
<td>Child Welfare Services</td>
<td>WIC</td>
</tr>
<tr>
<td>HOPE Infant</td>
<td>DSEP</td>
</tr>
<tr>
<td>FASD</td>
<td>School Districts</td>
</tr>
<tr>
<td>Public Health Nurse Family Partnerships</td>
<td>First 5 Initiatives</td>
</tr>
<tr>
<td>California Early Start</td>
<td>Head Start</td>
</tr>
<tr>
<td>Early Head Start</td>
<td>Military</td>
</tr>
<tr>
<td>Home Visiting Agencies</td>
<td></td>
</tr>
</tbody>
</table>
North County Demographic Snapshot

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>HDS</th>
<th>First Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>71%</td>
<td>88%</td>
</tr>
<tr>
<td>White</td>
<td>17%</td>
<td>8%</td>
</tr>
<tr>
<td>Multiracial / Other</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Asian / Pacific Islander</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Black</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age Bracket</th>
<th>HDS</th>
<th>First Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to &lt; 3 yrs</td>
<td>75%</td>
<td>100%</td>
</tr>
<tr>
<td>3 to 5 yrs</td>
<td>25%</td>
<td>-</td>
</tr>
</tbody>
</table>
HDS North Inland Services

Level 3
- Speech, Physical & Occupational Therapy
- Behavior Therapy
- Care Coordination

Level 2
- One: One Coaching - Development
- One: One Coaching - Behavior
- Care Coordination

Level 1
- Specialized Developmental Classes
- Developmental Assessment
- Parent Workshops (Includes Screening)
- Care Coordination
Why Early Intervention So Early?

• 12-16% of all children demonstrate developmental and/or behavioral delays
  – Only 2% of children 0-2yrs of age receive treatment
  – Only 5% of children 3-5yrs of age receive treatment

• HDS supports young children with mild to moderate delays
  – Engages the parent and provides strategies to practice at home
  – Generally short term and effective
  – Less costly than intensive services in later years
HDS Performance Measures FY16

- HDS provided services to 1,505 children
  - Receiving 11,923 services (or sessions)
Measuring Outcomes
Developmental Trajectories

Analysis Used to Compare Anticipated Developmental Gains With & Without Developmental Services

Cognitive Strand 0 - <3 Years of Age & ≥ 5% DELAY at Pretest
HDS North Inland Service Excellence

- 92% Strongly Agree • Services Were Valuable
- 92% Strongly Agree • Recommend to Family and Friends
- 95% Strongly Agree • Treated With Kindness and Respect
What HDS Families are Saying

“Professional”

“Passionate”

“Knowledgeable”
First Steps Services

Home Visits
- Visits also held at: the San Diego Children’s Museum in Escondido; the library; the park
- We use two nationally recognized evidence-based models: Healthy Families America (HFA) and Parents As Teachers (PAT)
- All staff are bilingual and are certified to teach Infant Massage
- All staff are Certified Lactation Educator Counselors
First Steps Services

Education and Socialization Opportunities

- *Parent and Family Workshops*
  Storybook and Reading; Music and Movement; Nutrition and Cooking with Kids; Car Seat Safety, and more.

- *Family Events*
  Music in the Park; Holiday Developmental Celebrations, and more.
First Steps Performance Measures FY15-16

• 150 Families Served Annually
• 2,237 Home Visits provided by 10 Home Visitors (North Inland and North Coastal Regions)
• 2,307 Assessments
  - Of 176 Postpartum Depression Screenings, 3 - 43% of our families are struggling with depression (depending on time point of screening)
• Immunizations Up to Date
  - 100% at 30 days, 89% at 6 months; 91-100% at 12, 18, 24 and 30 months
• Attendance at Parent/Family Workshops and Events
  - 259 attendees at our workshops
  - 496 attendees at our events
Why Home Visiting

- Comprehensive and caring approach to identifying a family’s strengths and meeting a family’s needs.
- Reaches hard to reach populations
- Costs less for home visiting services than to treat entrenched problems later.
- Observe environments and routines first hand and can support and build on these
- Allows involvement of other key family members who may otherwise not be available.
- Positive outcomes due to long-term relationships developed between a family and their home visitor.
First Steps Service Excellence

93% Strongly Agree
• Learned New Parenting Strategies

90%/87% Strongly Agree
• Increased Understanding of My Child’s Development/Strengthened My Relationship with My Children

89% Strongly Agree
• Connected to Useful Resources in My Community
What First Steps Families are Saying

“I understand now how to help my children grow, and my relationships with my kids and family are so much better!”

“I don’t feel alone any more. When I was pregnant I didn’t know where to go for prenatal care or what I was going to do with a baby. Odilia has changed my life. I’m confident now that I can be a great mom, and now I know where to go and how to get what I need!”

“I’ve learned so much. Thank you First Steps!”

“I love Michelle my home visitor. She has helped me so much in so many ways!”
Next Steps FY17
HDS - FY17

• Performance Improvement Project:
  – Increase the percentage of families completing services

• Partner with Palomar Health Foundation
  – Secure Program Donations to support services
First Steps - FY17

• Performance Improvement Project
  – Mental Health Services for First Steps families (Workshops, Parent Cafes, 1:1 In-Home Counseling).

• New partnership with “Vista Partnership for Children”
  – Support graduating families to transition into childcare and preschool.

• Expansion of our North County Home Visiting Collaborative
  (in partnership with public health nursing and community agencies)
Contact Information

• Cindy Linder
  Regional Coordinator HDS North Inland
  Phone: 760-807-0113
  Email: cynthia.linder@palomarhealth.org

• Shirin Strauss
  Program Director North Region First Steps
  Phone: 760-739-3990
  Email: shirin.strauss@palomarhealth.org
Palomar Health
Pharmacy Services
FY15 Research & Educational Program Summary

ADDENDUM C

Jeremy Lee, Pharm.D, BCPS
District Director, Pharmacy Services
CareFusion Clinical Excellence Grant

Infusion Device Alarm Management Performance Improvement Project

Prepared by Diana Schultz, Medication Safety Manager
Grant Description

• $50,000 one time grant awarded to Palomar Health for the Infusion Device Alarm Management Performance Improvement Project.

• The project’s proposal is to utilize continuous quality data and staff observation to analyze infusion device alarms and develop a set of best practices for medication storage and preparation, pump settings and infusion administration process to reduce unnecessary infusion alarms.

• Funds have been used for nursing education and for the administrative resident’s project time.
Time Line

Pre-intervention Nursing Survey 7/14

Data analysis from pumps pre intervention 9/14 (Data 3/14 thru 7/14)

Interventions-setting changes 11/14

Intervention-education 10-11/14 at Pom-then 2nd qtr.2015 Districtwide

Intervention-anti-siphon valve 2/15 @ POM, 7/15 @ PMC

Data Analysis from pumps post intervention 7/15-10/15

Post intervention Nursing Survey 7/15
Preliminary Results for Air In Line Alarms for Drugs with Anti-Siphon Valve during post period.

Pre Period: 03/20/2014 to 05/18/2014
Post Period: 02/01/2015 to 03/31/2015

Total ALL Alarms per Infusion - Pre vs. Post Comparison

- **Pre- # of ALL Alarms per Infusion**
- **Post - # of ALL Alarms per Infusion**

<table>
<thead>
<tr>
<th>Infusion Type</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amiodarone</td>
<td>0.638</td>
<td>0.254</td>
</tr>
<tr>
<td>CRITICAL CARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TPN</td>
<td>1.778</td>
<td>0.133</td>
</tr>
<tr>
<td>GENERAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amiodarone</td>
<td>0.538</td>
<td>0.136</td>
</tr>
<tr>
<td>IMC-TELE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Keck Graduate Institute (KGI)  
School of Pharmacy

- Partnership established in March of 2014
- PH Pharmacy PGY2 Transitions of Care Residency received funding of $55,000
- Faculty positions in Transitions of Care and Ambulatory Care were created
Impact of KGI Faculty

MTM Program Summary Jan 2015- Mar 2016
% of Patients with BP at Goal (N=214)

Month

Jan 15: 5
Feb 15: 9
Mar 15: 14
Apr 15: 19
May 15: 21
Jun 15: 27
Jul 15: 33
Aug 15: 40
Sep 15: 53
Oct 15: 60
Nov 15: 70
Dec 15: 74
Jan 16: 80
Feb 16: 84
Mar 16: 87

Percent

0 10 20 30 40 50 60 70 80 90 100
UCSD Skaggs Schools of Pharmacy and Pharmaceutical Sciences

• Partnership established in July of 2016
• PH Pharmacy PGY2 Ambulatory Care Residency received funding of $55,000
• Faculty position to perform medication use improvement research at Villa Pomerado.
VALUE OF PHARMACY RESIDENCY PROGRAM
PH Pharmacy Residency Program

• Eight Pharmacy Residents
  – 5 PGY1 residents (post grad year 1)
  – 3 PGY2 residents (post grad year 2)
    • Pharmacy Administration
    • Transitions of Care
    • Ambulatory Care

• Palomar Health is getting positive return on investment: ROI > ~200%

• Residents are making essential contributions towards strategic initiatives
### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Salaries and Wages</td>
<td>(364,601)</td>
</tr>
<tr>
<td>Benefits</td>
<td>(36,456)</td>
</tr>
<tr>
<td>PGY1 Program Expenses</td>
<td>(20,182)</td>
</tr>
<tr>
<td>PGY2 TOC/Admin Expenses</td>
<td>(11,529)</td>
</tr>
<tr>
<td>PGY2 Ambulatory Care (accreditation fee/recruitment)</td>
<td>(5,616)</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>(438,384)</strong></td>
</tr>
</tbody>
</table>

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated Medicare reimbursement for PGY1 program</td>
<td>126,503</td>
</tr>
<tr>
<td>UOP/UCSD Reimbursement/Education Fund PGY1</td>
<td>9,056</td>
</tr>
<tr>
<td>UOP/Education Fund PGY2</td>
<td>1,220</td>
</tr>
<tr>
<td>AMR study</td>
<td>230</td>
</tr>
<tr>
<td>KGI Funding</td>
<td>52,000</td>
</tr>
<tr>
<td>Staff Contributions (direct scheduled staff shifts covered)</td>
<td>123,760</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>312,769</strong></td>
</tr>
</tbody>
</table>

### Direct Cost (Revenue - Expenses)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td><strong>(125,615)</strong></td>
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</table>

### Indirect Contribution

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offset Staff Contributions (specialist/MGR time)</td>
<td>519,975</td>
</tr>
<tr>
<td>Direct cost savings from projects</td>
<td>40,000</td>
</tr>
<tr>
<td><strong>Total Indirect Contributions</strong></td>
<td><strong>559,975</strong></td>
</tr>
</tbody>
</table>

**Total Contribution (i.e. positive benefit to organization)**: 434,360
Residency Projects for 2015-16

Prepared by Jeremy Lee, Director of Pharmacy Services
2016 PGY1 Resident Projects

• Blue Ocean Leadership in the Pharmacy Setting
• A Population Health Strategy in High Risk Hypertension Patients
• Implementation of a Complex Care Clinic
• Optimization of CPOE drug alerts
• Implementation of an Observational pharmacy Skills based Competency
2016 Resident MUEs

• Insulin drip conversions MUE. Evaluate subQ insulin dosing and timing. Collaborate with Diabetes Health and provide MD and staff education.
• Procedural Sedation MUE. Medication use and adverse event review during procedural sedation pre and post implementation of end tidal co2 monitoring outside the S&P platform.
• Immune Globulin Intravenous Product Selection based on Risk Criteria.
• Aminoglycoside safety MUE. Review pharmacist management of aminoglycoside dosing, identify adverse events from therapy, and provide staff education.
• Lovenox versus Heparin for VTE Prophy
• IVIG (IBW Vs ABW)
2016 PGY2 Pharmacy Admin Projects

• LEAN project improved customer satisfaction for both nurses and patients by optimizing non-Pyxis medication delivery to reduce medication requests, increase turnaround time, and reduce waste.

• Projects within LEAN included evaluating the ATP unit dose machine; many medications could be bought pre-unit dosed, which decreased technician labor and could save Palomar around $45,000 compared to unit dosing bulk bottle medications.

• Improved employee engagement: staff provided input on various processes such as having an intercom system for the IV room, optimizing the time-flagging IV board, and workflow optimization.
2016 PGY2 TOC Projects

• Improved care transitions and patient care: Pharmacist clinically evaluated medication regimens for a total of 69 patients and provided 43 interventions which were further categorized by impact and significance of 13 high, 20 medium and 10 low.

• Potential cost savings for SNFs: Pharmacist identified 108 unnecessary PRN medications through clinical evaluation which would have been approximately $9,289.12 saved for participating SNFs.

• Improved patient care: Pharmacist identified opportunities for improvement in inpatient discharge documentation to SNF.
Summary

• Through grant funded research Palomar Health will provide health systems with a set of best practices for medication storage and preparation, pump settings and infusion administration processes to reduce unnecessary infusion alarms

• The Palomar Health Pharmacy Practice Educational Program brings value to our district through clinical and operational efficiencies, supply cost savings, and quality improvement
ADDENDUM D

Grant Update

October 14, 2016
# Current Grants

<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTOR</th>
<th>Purpose</th>
<th>Awarded</th>
<th>FY17 Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>First 5 First Steps</td>
<td>First 5 Commission</td>
<td>To provide a comprehensive, community-based Targeted at Risk Home Visiting project for the North Inland/North Coastal region using the Healthy Families America (HFA) and Parents As Teachers (PAT) models. Palomar Health will lead this project and provide direct home visiting services.</td>
<td>$1,278,323</td>
<td>$1,063,652</td>
<td>07/01/15-06/30/20</td>
<td>*$92,102 overhead received in FY16?&lt;br&gt;$117,766 overhead budget for FY17&lt;br&gt;$214,671 invoiced through September 2016</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>$1,943,540</td>
<td>$1,543,798</td>
<td>07/01/15-06/30/20</td>
<td>*$201,530 overhead received in FY16&lt;br&gt;$212,108 overhead budget for FY17&lt;br&gt;$399,742 invoiced through September 2016</td>
</tr>
</tbody>
</table>
## Current Grants

<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTOR</th>
<th>Purpose</th>
<th>Awarded</th>
<th>FY17 Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
</table>
| Schwartz Center Rounds                     | The Schwartz Center for Compassionate Healthcare   | To promote compassionate healthcare through the conduction of Schwartz Center Rounds educational forums and programs.                                                                                         | $5,000   | 0                     | 7/1/2013 – N/A                    | *$1,595 spent in FY16
*$1,571 remains available                                                  |
| Green Oaks Ranch                           | New Alternatives, Inc.                             | 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 & Human Services Agency Social Workers. | $863,500 ($157,000 annually for up to 5.5 years) | $110,420 | 1/1/16-12/31/16 with option to extend for 1.5 years, not to exceed 6/30/18 | *$155,533 received in FY16
*$44,566 invoiced through September 2016
*contract is based on calendar year                                      |
| Bioterrorism/Emergency Preparedness       | County of San Diego, Health & Human Agency        | 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. | $1,578,613 Total over 12 years. | $69,406 | 5/25/05-6/30/18         | *$69,405 received in FY16
*$11,285 spent through September 2016
*$217,767 currently remains in fund                                      |
## Current Grants

<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTOR</th>
<th>Purpose</th>
<th>Awarded</th>
<th>FY17 Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Children’s Alliance (NCA)</td>
<td>National Children’s Alliance (NCA)</td>
<td>Having met standards set for Child Advocacy Centers, PH is an accredited member of the NCA. As a member of the NCA, PH receives a grant of $9,000 annually to provide continued support for the cost of a bilingual interviewer in PH’s Child Abuse Program.</td>
<td>$9,000</td>
<td>$9,000</td>
<td>1/1/04-N/A</td>
<td>*Payment of FY17 award is pending</td>
</tr>
</tbody>
</table>
| Marjorie Mosher Schmidt Foundation - Child Abuse Program            | Marjorie Mosher Schmidt Foundation                                      | To provide funds for Nurse education as well as forensic imaging equipment.                                                                                                                           | $27,000  | $0                    | 12/14/09-N/A   | *$10,417 remains in fund
                                                                                                                  |                                                                                                                                   |                                                                                                           | *Additional funding is not expected at this time                                                 |
| In-n-Out - Child Abuse Program                                       | In-N-Out Child Abuse Foundation                                         | To provide funding for SART/Child Abuse Program community education and bilingual interviewing at the center. Funds to be used to provide follow-up with families and children who have been through counseling. | $40,500  | TBD                   | N/A             | *Received $7,500 in December 2015
<pre><code>                                                                                                              |                                                                                                                                   |                                                                                                           | *Anticipate another $7,500 award in December 2016                                           |
</code></pre>
<table>
<thead>
<tr>
<th>TITLE</th>
<th>GRANTOR</th>
<th>Purpose</th>
<th>Awarded</th>
<th>FY17 Funds Receivable</th>
<th>Beg/End Date</th>
<th>Updates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keck Pharmacy Resident grant</td>
<td>Keck Graduate Institute of Pharmacy</td>
<td>To provide the opportunity for Palomar Health Residents to participate in teaching Pharmacy students.</td>
<td>$55,000 per year</td>
<td>$55,000</td>
<td>4/1/14-8/31/18</td>
<td><em>Program began 7/1/14 and will be invoiced on a quarterly basis</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>*$15,025 invoiced in first quarter of FY17.</td>
</tr>
<tr>
<td>UCSD Pharmacy Resident grant</td>
<td>UCSD Skaggs Schools of Pharmacy and Pharmaceutical Sciences</td>
<td>To appoint one PGY2 Palomar Health Resident to provide instruction for pharmacy students to oversee their clinical experience at Palomar Health.</td>
<td>$55,000 per year</td>
<td>$55,000</td>
<td>8/1/16-7/31/20</td>
<td><em>Program began 8/1/16 and will be invoiced on a quarterly basis</em></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>*$8,586 invoiced in first quarter of FY17.</td>
</tr>
</tbody>
</table>
ADDENDUM E
I. PURPOSE:
1. 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 Board approval prior to execution.
   2. All Budgeted, Routine Physician Agreements must comply with PH 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 submitted to the Corporate Secretary of Health Development once the Agreement has been signed by both parties.
   4. At the next Board meeting following Agreement execution, the Form A and Abstract Table for each executed Agreement will be presented to provide background on the Agreement(s) being presented for Board approval.
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 PH Lucidoc Procedure #33572 Contract Review Procedure For Physician Agreements.
   3. A Form A and Abstract Table must be completed for all Non-Budgeted Physician Agreements and submitted to the Corporate Secretary of Health Development prior to the next Board meeting.
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.
Palomar Pomerado North County Health Development, Inc.
Procedure for Board Approval of Physician Agreements

I. PURPOSE:
1. 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 prior to execution.
2. All Budgeted, Routine Physician Agreements must comply with PPHPH 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.
4. At the next Board meeting following Agreement execution, the Form A and Abstract Table for each executed Agreement will be presented to provide background on the Agreement(s) being presented for Board approval.

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 PPHPH 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 the next Board approval meeting.

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.
ADDENDUM F

Financial Review
June 2016
FY17 YTD

October 25, 2016
### Fiscal Year 2016

**June 2016 - Income Statement Summary**

<table>
<thead>
<tr>
<th>Health Development</th>
<th>Research Institute</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
</tr>
<tr>
<td>YTD Actual</td>
<td>294,216</td>
</tr>
<tr>
<td>YTD Budget</td>
<td>305,962</td>
</tr>
<tr>
<td>Budget Variance YTD</td>
<td>(11,746)</td>
</tr>
<tr>
<td>YTD Actual</td>
<td>17,000</td>
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<td>YTD Budget</td>
<td>10,150</td>
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<tr>
<td>Budget Variance YTD</td>
<td>6,850</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
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<tr>
<td>YTD Actual</td>
<td>125,878</td>
</tr>
<tr>
<td>YTD Budget</td>
<td>129,745</td>
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<tr>
<td>Budget Variance YTD</td>
<td>3,867</td>
</tr>
<tr>
<td>YTD Actual</td>
<td>31,307</td>
</tr>
<tr>
<td>YTD Budget</td>
<td>12,000</td>
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<tr>
<td>Budget Variance YTD</td>
<td>(19,307)</td>
</tr>
<tr>
<td><strong>Net Income/Loss</strong></td>
<td></td>
</tr>
<tr>
<td>YTD Actual</td>
<td>168,338</td>
</tr>
<tr>
<td>YTD Budget</td>
<td>176,205</td>
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<td>Budget Variance YTD</td>
<td>(7,867)</td>
</tr>
<tr>
<td>YTD Actual</td>
<td>(14,307)</td>
</tr>
<tr>
<td>YTD Budget</td>
<td>(1,850)</td>
</tr>
<tr>
<td>Budget Variance YTD</td>
<td>(12,457)</td>
</tr>
</tbody>
</table>
Health Development
FY 2016 Indirect Revenue Sources

HD Indirect Revenue

- First Steps
- HDS
## Income Statement Summary

<table>
<thead>
<tr>
<th></th>
<th>Health Development</th>
<th>Research Institute</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YTD Actual</td>
<td>YTD Budget</td>
</tr>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>62,872</td>
<td>76,393</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td>33,620</td>
<td>33,508</td>
</tr>
<tr>
<td><strong>Net Income/Loss</strong></td>
<td>29,252</td>
<td>42,885</td>
</tr>
</tbody>
</table>