

BOARD GOVERNANCE COMMITTEE

Meeting Agenda
Monday, April 20, 2026
12:00 p.m.

Please See Page 2 For Meeting Location Options

<i>The Board may take action on any of the items listed below, including items specifically labeled "Informational Only"</i>		Time	Form A Page	Target
Call To Order				12:00
I.	Establishment of Quorum	1		12:01
II.	Public Comments¹	30		12:31
III.	Action Item(s) (ADD A)	59		1:00
	A. <i>Approval: Governance Committee Meeting Minutes, Monday, March 23, 2026 (Pp 6-10)</i>			
	B. <i>Board of Directors Per Diem and Reimbursement Policy</i>			
	C. <i>58873: Extraordinary Event Management (Pp 11-12)</i>			
IV.	Standing Item(s) (ADD B)			
	A. Retirement of Policies			
	B. Legislative Update: ACHD Advocate - <i>Informational Only (Pp 14-18)</i>	5		1:20
	C. Lucidoc Board Policy Listing – <i>Informational Only (Pp 19)</i>	5		1:25
Final Adjournment				1:30

Board Governance Committee Members

Voting Members	Non-Voting Members
Jeff Griffith, EMT-P, Chair	Diane Hansen, President & CEO
Terry Corrales, RN	Kevin DeBruin, Chief Legal Officer
Michael Pacheco	Kristin Gaspar, Vice President, External Affairs & Strategic Initiatives
	Bret Ginther, MD, Chief Information Officer
Alternate Voting Member	Omar Khawaja, MD, Chief Medical Officer
Abbi Jahaaski, MSN, BSN, RN – 1 st Board Alternate	Russ Riehl, Chief Administrative Officer
	Mel Russell, Chief Nurse Executive/Chief Operating Officer
	Andrew Tokar, Chief Financial Officer
	Committee Assistant
	Janet Kren, Committee Assistant

Note: If you need special assistance to participate in the meeting, please call 760.740.6375, 72 hours prior to the meeting so that we may provide reasonable accommodations.

¹ 3 minutes allowed per speaker. For further details, see Request for Public Comment Process and Policy on page 3 of the agenda.



Board Governance Committee Meeting Location Options

Linda Greer Conference Room

2125 Citracado Parkway, Suite 300, Escondido, CA 92029

- Elected Members of the Palomar Health Board of Directors will attend at this location, unless otherwise noticed below
- Other non-Board member attendees, and members of the public may also attend at this location

<https://www.microsoft.com/en-us/microsoft-teams/join-a-meeting?rtc=1>

Meeting ID: 223 586 360 330 86

Passcode: kd9ae2CB

or

Dial in using your phone at 929.352.2216; Access Code: 285 237 470#¹

- Non-Board member attendees, and members of the public may also attend the meeting virtually utilizing the above link
- An elected member of the Board of Directors will be attending the meeting virtually from these locations

¹ New to Microsoft Teams? Get the app now and be ready when your first meeting starts: [Download Teams](#)

Source:

Applies to Facilities:
All Palomar Health Facilities**Applies to Departments:**
Board of Directors

Policy : Public Comments and Attendance at Public Board Meetings

I. SUMMARY/INTENT:

A. It is the intention of the Palomar Health Board of Directors to hear public comment about any topic that is under its jurisdiction. This policy is intended to provide guidelines in the interest of conducting orderly, open public meetings while ensuring that the public is afforded ample opportunity to attend and to address the board at any meetings of the whole board or board committees.

II. DEFINITIONS:

A. None defined.

III. POLICY: COMPLIANCE - KEY ELEMENTS:

- A. There will be one time period allotted for public comment at the start of the public meeting. Should the chair determine that further public comment is required during a public meeting, the chair can call for such additional public comment immediately prior to the adjournment of the public meeting. Members of the public who wish to address the Board are asked to complete a [Request for Public Comment form](#) and submit to the Board Assistant prior to or during the meeting. The information requested shall be limited to name, address, phone number and subject, however, the requesting public member shall submit the requested information voluntarily. It will not be a condition of speaking.
- B. Should Board action be requested, it is encouraged that the public requestor include the request on the *Request for Public Comment* as well. Any member of the public who is speaking is encouraged to submit written copies of the presentation.
- C. The subject matter of any speaker must be germane to Palomar Health's jurisdiction.
- D. Based solely on the number of speaking requests, the Board will set the time allowed for each speaker prior to the public sections of the meeting, but usually will not exceed 3 minutes per speaker, with a cumulative total of thirty minutes.
- E. Questions or comments will be entertained during the "Public Comments" section on the agenda. All public comments will be limited to the designated times, including at all board meetings, committee meetings and board workshops.
- F. All voting and non-voting members of a Board committee will be seated at the table. Name placards will be created as placeholders for those seats for Board members, committee members, staff, and scribes. Any other attendees, staff or public, are welcome to sit at seats that do not have name placards, as well as on any other chairs in the room. For Palomar Health Board meetings, members of the public will sit in a seating area designated for the public.
- G. In the event of a disturbance that is sufficient to impede the proceedings, all persons may be excluded with the exception of newspaper personnel who were not involved in the disturbance in question.
- H. The public shall be afforded those rights listed below (Government Code Section 54953 and 54954).
1. To receive appropriate notice of meetings;
 2. To attend with no pre-conditions to attendance;
 3. To testify within reasonable limits prior to ordering consideration of the subject in question;
 4. To know the result of any ballots cast;
 5. To broadcast or record proceedings (conditional on lack of disruption to meeting);
 6. To review recordings of meetings within thirty days of recording; minutes to be Board approved before release,
 7. To publicly criticize Palomar Health or the Board; and
 8. To review without delay agendas of all public meetings and any other writings distributed at the meeting.
- I. This policy will be reviewed and updated as required or at least every three years.

Board Governance Committee Meeting

Meeting will begin at 12:00 p.m.



Request for Public Comments

If you would like to make a public comment, submit your request by doing the following:

- **In Person: Submit a Public Comment Form, or verbally submit a request, to the Board Clerk**
- **Virtual: Enter your name and “Public Comment” in the chat function**

Those who submit a request will be called on during the Public Comments section and given 3 minutes to speak.

Public Comments Process

Pursuant to the Brown Act, the Board of Directors can only take action on items listed on the posted agenda. To ensure comments from the public can be made, there is a 30 minute public comments period at the beginning of the meeting. Each speaker who has requested to make a comment is granted three (3) minutes to speak. The public comment period is an opportunity to address the Board of Directors on agenda items or items of general interest within the subject matter jurisdiction of Palomar Health.

ADDENDUM A

<i>Board Governance Committee Minutes – Monday, March 23, 2026</i>		
<i>Agenda Item</i>	<i>Conclusion/Action</i>	<i>Final?</i>
<i>Discussion</i>		
NOTICE OF MEETING		
<p>Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escondido, CA 92029, as well as on the Palomar Health website, on Friday, March 20, 2026 and an Amended posting on Friday, March 20, 2026, which is consistent with legal requirements.</p>		
CALL TO ORDER		
<p>The meeting, which was held in the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escondido, CA 92029, and virtually, was called to order at 12:00 p.m. by Committee Chair Jeff Griffith.</p>		
I. ESTABLISHMENT OF QUORUM		
<ul style="list-style-type: none"> Quorum comprised of: Directors Jeff Griffith, Terry Corrales, and Michael Pacheco 		
II. PUBLIC COMMENTS		
<ul style="list-style-type: none"> No public comments 		

III. ACTION ITEMS		
<p>A. <i>Approval:</i> Board Governance Committee Meeting Minutes, Monday, February 23, 2026</p>	<p>MOTION by Director Corrales, 2nd by Director Pacheco to approve the February 23, 2026 Board Governance Committee Minutes as presented.</p> <p>Roll call voting utilized.</p> <p>Director Corrales - aye Director Griffith – aye Director Pacheco – aye</p> <p>Three in favor. None opposed. None absent. No abstention(s)</p> <p>Motion approved</p>	
<ul style="list-style-type: none"> • No Discussion 		
<p>B. Teleconferencing Disruptions Policy</p>	<p>MOTION by Director Pacheco, 2nd by Director Corrales to accept and recommend the Teleconferencing Disruptions Policy for full Board of Directors approval.</p> <p>Roll call voting utilized.</p> <p>Director Corrales - aye Director Griffith – aye Director Pacheco – aye</p> <p>Three in favor. None opposed. None absent. No abstention(s)</p> <p>Motion approved</p>	
<p>Discussion:</p> <ul style="list-style-type: none"> • Reviewed the new policy and the 2026 Brown Act requirements and instances where it would take effect that needs to be approved by the Palomar Health Board of Directors July 1, 2026 		

<p>C. Palomar UCSD Authority Board of Directors Appointment Process, Procedure, Evaluation, Re-appointment, Removal and Reporting Policy</p>	<p>MOTION by Director Pacheco, 2nd by Director Corrales to accept and recommend the Palomar UCSD Authority Board of Directors Appointment Process for full Board of Directors approval with discussed changes.</p> <p>Roll call voting utilized.</p> <p>Director Corrales - aye Director Griffith – aye Director Pacheco – aye</p> <p>Three in favor. None opposed. None absent. No abstention(s)</p> <p>Motion approved</p>	
<p>Discussion:</p> <ul style="list-style-type: none"> Reviewed proposed language and changes. Position Description and Application form will be included with the policy 		
<p>D. Palomar UCSD Authority Board of Directors Appointee Evaluation Policy</p>	<p>This item was Tabled</p>	
<p>Discussion:</p> <ul style="list-style-type: none"> Reviewed the possible need for this policy and decided to table the policy development at this time. 		
<p>E. Discussion: Board of Directors Per Diem and Reimbursement</p>	<p>MOTION by Director Pacheco, 2nd by Director Corrales to create a Board of Directors Policy for Per Diem and Reimbursement.</p> <p>Roll call voting utilized.</p> <p>Director Corrales - aye Director Griffith – aye Director Pacheco – aye</p> <p>Three in favor. None opposed. None absent. No abstention(s)</p> <p>Motion approved</p>	
<p>Discussion:</p> <ul style="list-style-type: none"> Discussed instances of per diem payments including meetings, events, etc. 		

IV. Standing Items		
A. Retirement of Policies	No Action	
Discussion: <ul style="list-style-type: none"> No policies to be retired at this time. 		
B. Legislative Update – 2026 Brown Act – <i>Informational Only</i>	A copy of the 2026 Brown Act changes will be emailed to the board and hard copies will be provided upon request. This item will be added to the next Board of Directors Regular Session Board of Directors meeting agenda.	
Discussion: <ul style="list-style-type: none"> Reviewed Brown Act Changes 		
C. Legislative Update: March 2026 ACHD Advocate – <i>Informational Only</i>	No Action	
Discussion: <ul style="list-style-type: none"> Verbal report was provided. 		
D. Lucidoc List of Board Policies – <i>Informational Only</i>	No action	
Discussion: <ul style="list-style-type: none"> Discussed the Human Resources Committee meeting to review their Charter. 		
FINAL ADJOURNMENT		
Meeting adjourned by Board Committee Chair Jeff Griffith at 1:24 p.m.		

Signatures:

Committee Chair

Jeff Griffith

Committee Assistant

Janet Kren

DRAFT

Source:**Applies to Facilities:**
All Palomar Health Facilities**Applies to Departments:**
All Departments

Policy : Extraordinary Event Management

I. SUMMARY/INTENT:

To establish a set of guidelines for notifying the Board of Directors when key events occur that pose a significant risk to Palomar Health.

II. DEFINITIONS:

Extraordinary Events: Events that may pose a significant risk to Palomar Health.

III. POLICY: COMPLIANCE - KEY ELEMENTS:

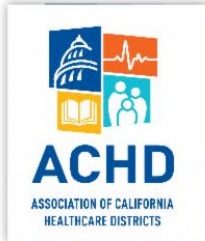
“Extraordinary Events” as outlined below must be reported to the Chair of the Board and the appropriate Board Committee Chair(s) by the Chief Executive Officer (CEO) or designated leadership team member in a timely manner as outlined in the applicable procedures. To the extent that an Extraordinary Event requires confidential treatment, communications should be initiated by an attorney representing Palomar Health in order to be protected by legal privileges.

List of “Extraordinary Events”

1. Publicity. All non-routine matters that are likely to be the subject of media coverage.
2. Employee Terminations and Discipline
 - a. Pending termination of any key personnel for any reason.
 - b. Pending termination of any non-consultant employee related to fraud, theft, breach of patient confidentiality, or any circumstances that are likely to be the subject of publicity.
 - c. A recommendation to forego suspension or termination of an employee that materially departs from standard guidelines/practices regarding employee discipline or termination.
 - d. Any deviation from standard limitations on an employee’s physical and electronic access during an administrative leave pending completion of an investigation that lasts longer than five (5) days.
3. Major System Failures and Other Threats to Physical Safety or Security of Employees, Patients, or Visitors. Events not involving direct patient care that create a risk of significant physical harm, violence or other harm to employees, patients or visitors. Examples include, but are not limited to, threats of physical violence, significant life/safety threats, and significant failures involving primary electronic systems or physical infrastructure.
4. Significant Patient Privacy or Confidential Data Breach. Any suspected breach of protected health information or confidential Palomar Health data which is of a significant volume or is assessed as likely to result in any public disclosure.
5. Any Suspected Drug Diversion. Any suspected theft or other diversion of drugs which is likely to result in discipline of an employee or has any potential to adversely affect patient care.
6. Patient Care Matters. Any patient care matter involving extraordinary circumstances, such as one or more of the following:
 - a. Probable liability exposure of \$1 million or greater;
 - b. Probable media coverage (negative or positive);
 - c. Involves a “systems issue” that exposes multiple patients to risk of serious injury;
 - d. Involves significant detrimental impact on involved care providers; and/or
 - e. Involves a “never event” or sentinel event.
7. Matters Covered by Legal, Risk, Compliance, or Departments with Related Functions.
 - a. Any pending, threatened, or reasonably likely litigation, claim, or assessment, including those arising from noncompliance with laws and regulations regarding the administration of federal or state programs (such as Medicare, Fraud & Abuse, Stark, EMTALA, Securities Laws, etc.) that meets one or more of the following:
 - i. Likely to exceed the designated threshold amount of \$50,000 in alignment with current health district law; or
 - ii. Involves currently unassessed risks that appear to potentially involve extraordinary penalties (such as, but not limited to, termination of licensure, accreditation, or qualification for payment for substantial services/activities).
 - b. Any act of fraud, suspected fraud, or breach of ethical standards on the part of any Palomar Health employee in the following categories:
 - i. Someone in a significant position of leadership;

- ii. A person who is directly involved in or is in a position to impact the internal financial accounting/reporting process; or
 - iii. An event of theft that does or could involve a material financial loss to Palomar Health.
 - c. All investigations by regulatory bodies involving a reasonable likelihood of a finding of illegality, required correction of process, or other noncompliance with any law or regulation.
 - d. All internal investigations under “Attorney Client Privilege” involving a reasonable likelihood that the investigation could result in a finding of illegality, required correction of process, or other noncompliance with any law or regulation.
 - e. Any other matter that must be reported to a regulatory body within 24 hours of knowledge of occurrence.
8. Policy to be reviewed every 3 years.

ADDENDUM B



ACHD

THE ADVOCATE

[CURIOUS ABOUT ACHD MEMBER BENEFITS?](#)

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WHAT'S NEW IN APRIL

CEO MESSAGE

ACHD is excited to announce that we have developed a **new advocacy resource for healthcare districts** to help streamline members' engagement in the association's policy work. [Sarah Bridge](#), **Vice President, Advocacy & Strategy**, has personally developed a new webinar on demand. The first in a two-part series, this webinar, [Navigating California Legislative Information](#), not only provides tips for engaging with your legislator(s), but also how to respond to **ACHD's Call-to-Action requests**. ACHD strives to provide members with support and tools to make it as easy as possible for you to quickly and efficiently make your voice heard. If you are a member and have an ACHD log in, these webinars are simple to access. If you need assistance accessing the on-demand platform, please contact [Sam Wright](#).

On the legislative front, ACHD is **pleased to report that our sponsored bill, [AB 2311 \(Rogers\)](#)**, that authorizes district hospitals to directly employ physicians, passed out of Assembly Health. The bill is now headed to **Assembly Business and Professions (B&P)**, where it will be heard on April 21. If you have not already, you can provide your district's support for AB 2311 in Assembly B&P and access the **ACHD template letter [here](#)**.

In addition, ACHD is Co-Sponsoring [AB 1811 \(Rogers/Gonzalez\)](#) with [the Rural County Representatives of California \(RCRC\)](#). RCRC is co-sponsoring this legislation with ACHD as a trusted partner. [Sarah Bridge](#) has been working diligently since last fall on this issue,

engaging the appropriate stakeholders and lawmakers to craft a solution, at least in the near term, so that healthcare districts in California, serving the most vulnerable populations with very few providers, do not lose access to state funding tied to this federal designation. **ACHD's Call-to Action on AB 1811** asks that to be included in ACHD's support letter, you simply need to [submit your district's logo here](#).

With the legislative spring recess behind us, the legislative season is gearing up for the busy spring cycle and the state budget revision in May (also referred to as the May Revise). ACHD will continue to update you on developments in real time, but in the meantime, please reach out with any questions you may have on any issue.

With gratitude,

Cathy Martin
Chief Executive Officer



LEGISLATIVE UPDATE

The California Legislature returned from Spring Recess on Monday April 6, 2026 and is now in the heart of the 2025-2026 legislative session's most significant stretch. With the April 24, 2026 deadline for policy committees to hear and report fiscal bills to their respective fiscal committees rapidly approaching, the pace in Sacramento has quickened significantly. Bills that do not clear their house of origin policy committee by that date will be held for the year. ACHD is closely monitoring a number of priority measures and has been actively engaged in hearings throughout the month. We continue to evaluate bills and anticipate engaging on several more issues in the coming months.



The full 2026 legislative calendar, including all upcoming deadlines, is available [here](#).

Bills to note:

[AB 2311 \(Schiavo\)](#): ACHD Sponsored Legislation Passes Assembly Health Committee

ACHD is thrilled to report a major milestone: [AB 2311 \(Schiavo\)](#), ACHD's sponsored bill for the 2025-2026 session, successfully passed the Assembly Committee on Health this month.

AB 2311 would authorize a district hospital to directly employ physicians and surgeons — creating an important and long-sought exemption to the general corporate practice of medicine prohibition.

The bill's passage out of Assembly Health was a meaningful step forward, and ACHD extends its sincere gratitude to **Chris Bjornberg, Interim CEO of Imperial Valley Healthcare District**, for providing compelling testimony in support of the bill at the hearing. His firsthand account of the operational and workforce challenges facing rural and underserved district hospitals made a clear and powerful case for why this legislation matters. ACHD is grateful for his leadership and willingness to speak on behalf of healthcare districts across California.

AB 2311 will next be heard in Assembly Business & Professions Committee on April 21, 2026.

AB 1811 (Rogers): Health Professional Shortage Area (HPSA) Designations ACHD CO-SPONSORED

Legislation focused on preserving HPSA designations and protecting the federal and state incentives that support clinician recruitment in underserved areas. The bill **will be heard in Assembly Health Committee on April 21, 2026.**

AB 1862 (Boerner) — Use of Taxpayer Funds Act:
ACHD UNDER REVIEW

AB 1862 would prohibit any public entity with a target on healthcare districts, from entering into a contract, lease, grant agreement, joint venture, partnership, or other arrangement with a private party that grants the private party the right to restrict or condition the use, allocation, or disbursement of taxpayer funds collected or received by the public entity.

Any contract provision that violates this prohibition and takes effect on or after January 1, 2027, would be void and unenforceable. The bill makes clear that private parties may still place conditions on the use of *non-taxpayer* funds in such arrangements, as long as that authority does not extend to public dollars. ACHD is in discussions with stakeholder and reviewing the provisions and impact closely.

SB 947 (McNerney) — Employment: Automated Decision Systems:
ACHD OPPOSE

SB 947 — also known as the "No Robo Bosses Act" — is a reintroduction of SB 7, which passed both chambers of the Legislature in 2025 but was vetoed by Governor Newsom. Sen. McNerney reintroduced the bill on February 2, 2026, addressing the Governor's stated concerns from his veto letter.

The bill would prohibit employers from using automated decision systems (ADS) to perform certain functions and would limit the purposes for, and manner in which, ADS may be used in employment settings. Employers would be prohibited from relying solely on an automated system for disciplinary or termination decisions and would be required to conduct a human independent investigation to corroborate any AI-generated output. [See California Employment Law Report](#) The bill also prohibits retaliation against workers who assert their rights under its provisions and authorizes the Labor Commissioner to enforce compliance.

On April 8, SB 947 passed out of the Senate Labor, Public Employment and Retirement Committee on a 3-1 vote, and was re-referred to the Senate Committee on Privacy, Data, Technology, and Consumer Protection where it will face its next hearing.

[SB 1054 \(Cabaldon\) Better Data, Better Coverage, Better California Act:](#)

ACHD UNDER REVIEW

Would streamline Medi-Cal eligibility verification by requiring additional employer reporting to the Employment Development Department, reducing red tape for members as work requirements are implemented.

2026-2027 California Budget:

The 2026-27 budget situation remains one of the most closely watched issues in Sacramento. As presented in January, the Governor's proposed budget carries a modest shortfall of approximately \$2.9 billion in 2026-27, with projected out-year deficits growing to roughly \$22 billion in 2027-28. The Legislative Analyst's Office (LAO) has characterized the underlying deficit as more significant, estimating the gap at closer to \$18 billion and has urged the Legislature to begin deliberations now rather than waiting for the Governor's revised numbers.

The Governor's May Revise is expected to be released on or around May 14, 2026 and will present updated revenue projections and the Administration's proposed solutions to address the state's structural deficit. This revised budget is one of the most anticipated policy documents of the year and is expected to bring significant clarity and further difficulty on funding for healthcare, workforce programs, and rural health initiatives. ACHD will be monitoring the May Revise closely and will issue an update to members as soon as key details are available.

Helpful budget resources:

- [Department of Finance: Governor's Budget Summary](#)
- [LAO 2026-27 Budget Analysis](#)
- [LAO Budget Series \(ongoing\)](#)

HPSA Update — ACHD Engages with HCAI:

ACHD attended a Health Professional Shortage Area (HPSA) workshop hosted by the Department of Health Care Access and Information (HCAI) this month. The workshop provided an important opportunity to engage directly with state officials on the process, criteria, and implications of HPSA designations, which carry significant consequences for healthcare districts and the rural and underserved communities they serve. HPSA designations drive federal incentives for clinician recruitment and retention, and any changes to the designation process or criteria can have immediate workforce and financial impacts on member districts.

ACHD continues to actively work on this issue and [AB 1811 \(Rogers\)](#), which is specifically focused on preserving and strengthening HPSA designations in California. ACHD will keep members informed as this issue develops through both the legislative and regulatory processes.

As always, ACHD encourages member districts to stay engaged and reach out with questions. Full legislative reports and tracking information are available at achd.org.

ACHD Sponsor Spotlight

Managing Toxic High-Performers in Healthcare



ACHD is pleased to share a recent article by Michelle Schwanhauser, CEO of **Moving Mountains HR Consulting**, on managing toxic high performers in healthcare—an increasingly important issue impacting workplace culture and retention.

[Read Article Here](#)

To build on this topic, ACHD will host an **upcoming webinar: [Improving Employee Retention in Today's Workforce](#)**, presented by Michelle Schwanhauser, on **April 21 at 10:00 AM PST**. This session will focus on practical strategies to improve employee retention and strengthen organizational culture.

ACHD | 1127 11th Street Suite 905 | SACRAMENTO, CA 95814 US

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LUCIDOC BOARD POLICY LISTING

Review Date: April 20, 2026

ID	Title	Type	Source	Owner	Next Review Date	Status
TBD	Teleconferencing Disruptions	Policy	BOD	DeBruin, Kevin	In Process	New
TBD	Palomar UCSD Health Board Appointee Policy	Policy	BOD	DeBruin, Kevin	In Process	New
TBD	Board Per Diem and Compensation	Policy	BOD	DeBruin, Kevin	In Process	New
27932	Naming Policy	Policy	BOD	DeBruin, Kevin	In Process	Official
59212	Bylaws of Palomar Health	Bylaws	BOD	DeBruin, Kevin	In Process	Official
51952	CEO Evaluation and Compensation*	Policy	BOD	DeBruin, Kevin	2/27/2025	Official
21809	Annual Budget Approval	Policy	BOD	Tokar, Andrew	8/17/2025	Official
44692	Physician Owned Medical Device (POD) Company Arrangements	Policy	BOD	DeBruin, Kevin	8/17/2025	Official
58873	Extraordinary Event Management	Policy	BOD	DeBruin, Kevin	11/13/2025	Official
71572	Charter of the Human Resources Committee of the Palomar Health Board of Directors	Bylaws	BOD	DeBruin, Kevin	5/1/2026	Official
58912	Outsourced Labor Policy	Procedure	BOD	Hansen, Diane	5/1/2026	Official
21780	Succession Policy	Policy	BOD	DeBruin, Kevin	5/1/2026	Official
27092	Annual Adoption of Statement of Investment	Policy	BOD	DeBruin, Kevin	9/11/2026	Official
72752	Charter of the Community Relations Committee	Bylaws	BOD	DeBruin, Kevin	9/27/2026	Official
21800	Conflict of Interest Code	Policy	BOD	DeBruin, Kevin	11/13/2026	Official
63352	Board Committee Agenda Creation	Policy	BOD	DeBruin, Kevin	2/14/2027	Official
72513	Charter of the Quality Review Committee	Bylaws	BOD	DeBruin, Kevin	4/10/2027	Official
71613	Charter of the Strategic and Facilities Planning Committee of the Palomar Health Board of Directors	Bylaws	BOD	DeBruin, Kevin	4/10/2027	Official
58892	Debt Policy	Policy	BOD	Tokar, Andrew	8/7/2027	Official
21776	Gifts and Donations	Policy	BOD	DeBruin, Kevin	11/13/2027	Official
21798	Oath of Office	Policy	BOD	DeBruin, Kevin	11/13/2027	Official
21825	Provider Recruitment	Policy	BOD	DeBruin, Kevin	11/13/2027	Official
11058	Nursing and Patient Care	Policy	BOD	DeBruin, Kevin	4/8/2028	Official
71612	Charter of the Finance Committee of the Palomar Health Board of Directors	Bylaws	BOD	DeBruin, Kevin	4/29/2028	Official
68552	Board of Directors Code of Conduct	Policy	BOD	DeBruin, Kevin	6/15/2028	Official
72512	Charter of the Audit and Compliance Committee	Bylaws	BOD	DeBruin, Kevin	9/10/2028	Official
71332	Charter of the Governance Committee of the Palomar Health Board of Directors	Bylaws	BOD	DeBruin, Kevin	9/10/2028	Official
70012	Board Dispute Resolution Policy	Policy	BOD	DeBruin, Kevin	4/7/2029	Official
21783	Political Activities on Palomar Health Property	Policy	BOD	DeBruin, Kevin	4/7/2029	Official
62012	Public Comment Form	Form	BOD	DeBruin, Kevin	4/7/2029	Official
21790	Public Comments and Attendance at Public Board Meetings	Policy	BOD	DeBruin, Kevin	4/7/2029	Official
21794	Revision of Policies	Policy	BOD	DeBruin, Kevin	4/xx/2029	4/13/2026 Board Approved

*Ad Hoc Committee