



# Ambulatory Benchmarking and Measurement

APPD Fall Session – Santa Fe, NM

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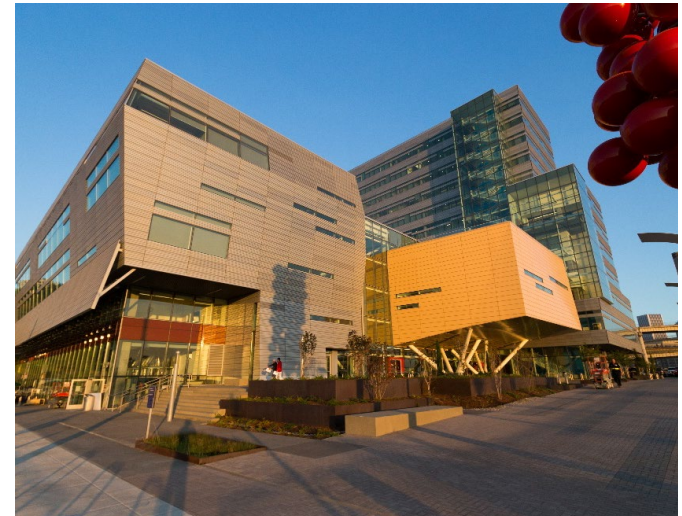
September 16, 2018; Anthony Masciotra, CEO, OHSU Practice Plan; Sr. Associate Dean, Clinical Practice, OHSU SoM

# From our founding in 1887...





# To the world-class university of today



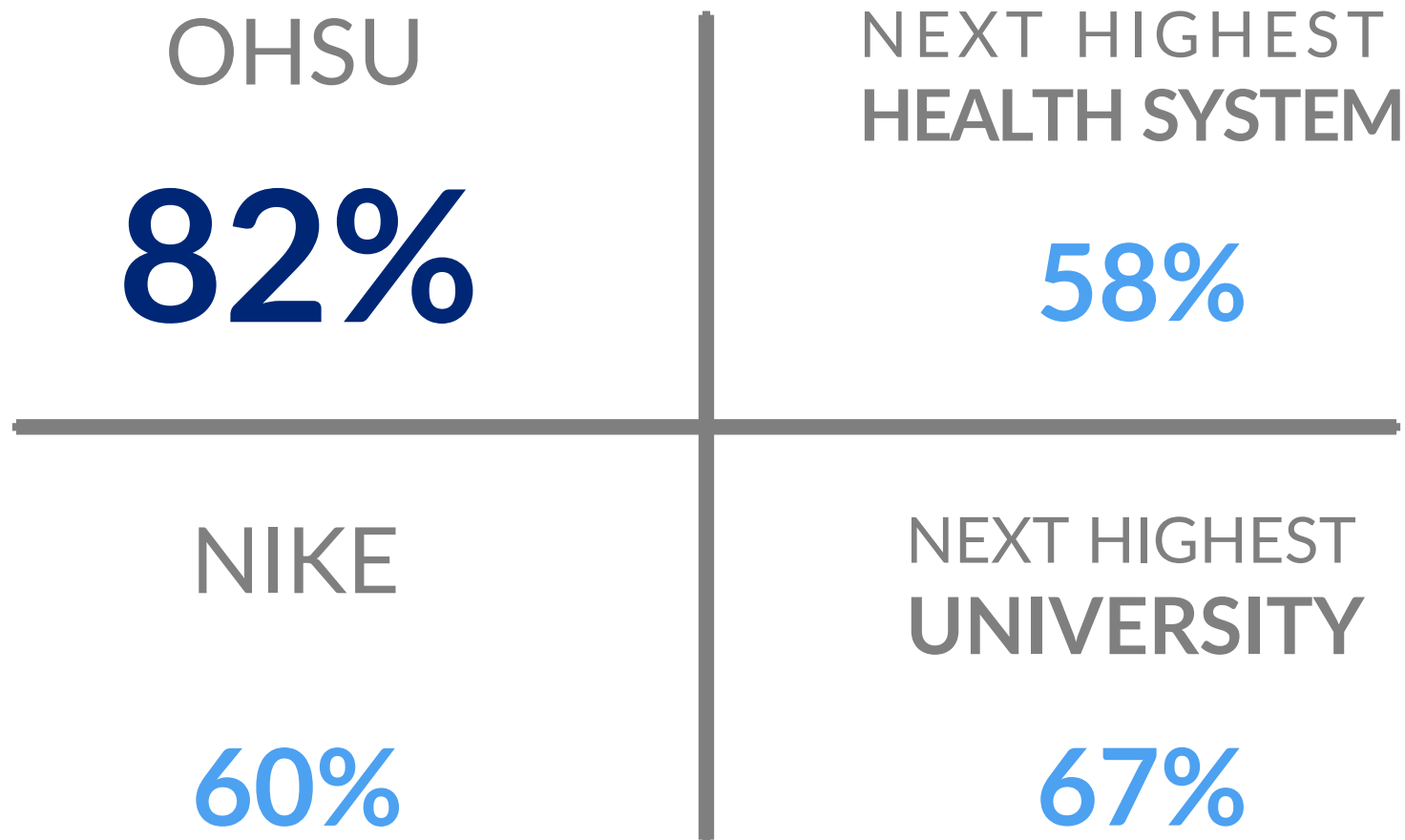


# Who we are: (round) numbers

- 16,200 employees (OHSU)
- 3,400 students + 1,100 residents, fellows and post-docs
- 2,900 faculty (1,830 clinical faculty and APP's)
- Operating revenue of \$3.0 billion in FY18
- 1,073 beds – 3 hospitals
- 1.6 million patient visits per year
- 43,000 admissions
- 47,000 surgical cases
- OHSU CMI June 2018 – 2.26 (average 2.18)
- More than \$400 million in grant funding in FY18
- 151 invention disclosures
- ~ 750,000 sq.ft on line in January 2019



## Highest brand favorability in Oregon



*Q: Respondents asked to rank on 5-pt. scale whether they had very favorable to unfavorable impression of listed organizations.*

# OHSU system recognition





# Ambulatory Measurement and Reporting

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# ***OHSU Ambulatory Strategic Focus*** ***(Initiates Performance Improvement Projects)***

## Overview:

- With increased demand for ambulatory care, patients need timely access. We need to
  - (i) **increase** our **ambulatory capacity** by expanding our current capabilities with existing personnel and facilities,
  - (ii) **change** our **care models** as reimbursement models change,
  - (iii) **improve system alignment** so that we become a provider of choice for primary, specialty and sub-specialty care.
  
- Key areas with large performance gaps and variation:
  - ***Access***
  - ***Alignment***
  - ***Growth***



# Ambulatory Strategy: 3-5 years

## Ambulatory Strategy

### Access

*"Can I get care & related health information when I want to?" **Lead with Yes***

Data & Information; reporting on operational performance

Demand, capacity & utilization management

### Alignment

*"Is the care coordinated, seamless and value-add?"*

Operational governance & decision making: centralize vs. decentralize

Inpatient and outpatient handoffs for care coordination

Staffing mix & comp model; working at top of license

### Growth

*"Do I interact with the best and are they continually raising the bar?"*

Innovative/improved service offerings

Grow ambulatory footprint with new OHSU and partner locations in metro area

Partnerships (Tuality, Adventist)

# Ambulatory Strategy: 2019 Focus & Tactics

## Ambulatory Strategy Access

### Access

*“Can I get care & related health information when I want to?” **Lead with Yes***

### Alignment: Reliable, Team Based Care

*“Is the care coordinated, seamless and value-add?”*

### Innovation & Growth

*“Do I interact with the best and are they continually raising the bar?”*

1. Improve capacity utilization across all clinics by matching available, scheduled and completed visits

2. Adopt new templates that incorporate standard template principles

3. Increase first pass yield for the intake process.

4. Adopt universal model for tracking target & actual cFTE and session length

5. Practice Optimization alignment (who needs to attend and dyad relationship. Roll out of new patient centered functions (in clinic lab draws and central check-in

6. Increase technology service offerings (to reduce reliance on office visits and manual work) across Ambulatory clinics

7. Increase the number of services that share referrals between OHSU, Tuquality and Adventist

Systems & Structures: DMS maturity, Resources/Positions, Governance, Decision Making - Centralized/Decentralized

# OHSU Ambulatory Reporting Tools

## Daily:

- Daily Huddle
- Epic Practice Manager Dashboard

## Monthly:

- Referral Metrics Scorecard
- Patient Access Scorecard
- Patient Experience Dashboard

## Quarterly:

- Physician Productivity Benchmarking (OFA Tool)
- Quarterly Operating Review

## External:

- Vizient Ambulatory Quality & Accountability Scorecard
- Action OI



# Preliminary Conclusions

1. **Tie** measurement to **strategic focus** and tactics (if it is not a goal, do not measure)
2. **Enable** problem solving by allowing **managers** to drill down into data **identify trends** and anticipate as opposed to react to data
3. Working as an institution to **adopt control charts** as our standard way of displaying data over time and identifying if a tactic is impacting a process/outcome measure
4. Working to **eliminate duplication** of efforts in data reporting/validation

# Challenges/Hurdles

- Accuracy hinges on **mission based accounting**
- **Data mapping-** matching data from various data sources
- We have a **department centric** view in almost everything we do. Our systems are not setup for multi-department collaborations (ie spine center, Orenco station, Beaverton). Faculty first can impact a department's desire to combine financials into one view (ie. Spine center)
- **Need for definitions-** what is a department, division, clinic?





## Daily Measures

1. Huddles
2. Practice Manager Dashboard



# Daily Ambulatory Huddle-Intake Form

## Huddle Form Report

Save Cancel Paste Copy Cut ABC Spelling Spelling

Commit Clipboard Spelling

### FPP Huddle Form

#### Your Information


Submitter Kevin O'Boyle

Phone # \*

#### Clinic and Date

Please double-check the Clinic and Date to prevent duplicate entries. To edit an existing entry, click cancel and use the Daily Summary report.

Clinic \*

Report Date \*    
If you're doing a report for tomorrow, please select tomorrow's date.

#### Direct Care Information

Enter a 0 if there are none

# of Scheduled Appointments \*

# of Open Slots: \*

# of Overbooked Appointments \*

# of Cancelled Sessions \*   
Cancelled by clinic, not patient cancellations

#### Indirect Care Information

# of calls for previous day \*

Abandonment Rate \*  %

Unresolved ABNs

#### Daily Staffing Information

# Daily Huddle-Summary

## Daily Ambulatory Rollup

**Filter Instructions:** Click on the calendar to filter by a different date. Hover over a column header below (such as Clinic) and click on the dropdown arrow to Filter by that column.

**Report Date Filter**

9/6/2018 

**Daily Ambulatory Rollup**

| ✓ Clinic Name                   | Clinic:Div                      | DC-Scheduled      | DC-Open         | DC-Overbook    | DC-Cancelled   | IC-Calls           | IC-Abandon        | Clinic:Grp | Created By              | Phone #      |
|---------------------------------|---------------------------------|-------------------|-----------------|----------------|----------------|--------------------|-------------------|------------|-------------------------|--------------|
|                                 |                                 | <b>Sum= 5,141</b> | <b>Sum= 695</b> | <b>Sum= 63</b> | <b>Sum= 11</b> | <b>Sum= 12,953</b> | <b>Average= 4</b> |            |                         |              |
| Abdominal Organ Transplant      | Surgery Timeshare               | 0                 | 0               | 0              | 0              | 0                  | 0                 | 1          | Tiffany Jeffords        | 43922        |
| Access Services                 | Other                           | 0                 | 0               | 0              | 0              | 357                | 6                 | 2          | Amber Demicheli         | 4-2739       |
| Avel Gordly                     | Psychiatry                      | 27                | 1               | 1              | 0              | 0                  | 0                 | 2          | Mary Fields             | 4-2953       |
| Beaverton Primary Care          | Other                           | 33                | 1               | 0              | 0              | 0                  | 0                 | 4          | Angela Brand            | 9712629150   |
| Bone Density                    | Other                           | 19                | 6               | 0              | 0              | 0                  | 0                 | 1          | Catherine Wilson-Skogen | 44814        |
| Cardiology Beaverton            | Knight Cardiovascular Institute | 0                 | 0               | 0              | 0              | 0                  | 0                 | 5          | Jamie O'Hollaren        | 89348        |
| Cardiology CHH                  | Knight Cardiovascular Institute | 72                | 0               | 0              | 0              | 0                  | 0                 | 5          | Jamie O'Hollaren        | 89348        |
| Cardiothoracic                  | Surgery Timeshare               | 11                | 0               | 0              | 0              | 0                  | 0                 | 1          | Satomi Seki             | 503-494-1136 |
| CDRC - Eugene                   | Pediatrics                      | 53                | 10              | 0              | 0              | 0                  | 0                 | 2          | Jennifer Wagner         | 541-346-7224 |
| CEI Astoria                     | Casey Eye Institute             | 45                | 4               | 2              | 0              | 0                  | 0                 | 3          | Stephanie Elsner        | 5033383803   |
| CEI CHH Specialty Clinics       | Casey Eye Institute             | 35                | 6               | 0              | 0              | 88                 | 14                | 3          | Andrea Marquett         | 4-4505       |
| CEI CHH Visual Fields           | Casey Eye Institute             | 19                | 0               | 2              | 0              | 0                  | 0                 | 3          | Diane Wilker            | 4-5555       |
| CEI Comprehensive Ophthalmology | Casey Eye Institute             | 97                | 5               | 0              | 0              | 210                | 7                 | 3          | Diane Wilker            | 4-5555       |
| CEI Cornea                      | Casey Eye Institute             | 62                | 1               | 6              | 0              | 0                  | 0                 | 3          | Sarah Grace             | 4-3620       |
| CEI Glaucoma                    | Casey Eye Institute             | 50                | 4               | 2              | 0              | 50                 | 2                 | 3          | Diane Wilker            | 4-5555       |
| CEI Hood River                  | Casey Eye Institute             | 0                 | 0               | 0              | 0              | 0                  | 0                 | 3          | Lynn Sherrell           | 541-386-1399 |
| CEI Longview                    | Casey Eye Institute             | 0                 | 0               | 0              | 0              | 0                  | 0                 | 3          | Jenna Slape             | 3604230220   |
| CEI Ocular Oncology             | Casey Eye Institute             | 0                 | 0               | 0              | 0              | 14                 | 14                | 3          | Janai Barth             | 4-0911       |
| CEI Oculoplastics               | Casey Eye Institute             | 42                | 0               | 0              | 0              | 0                  | 0                 | 3          | Dajana Zelen            | 48879        |
| CEI Ophthalmic Genetics         | Casey Eye Institute             | 5                 | 4               | 0              | 0              | 17                 | 0                 | 3          | Callista Fink           | 4-3795       |
| CEI Ophthalmic Imaging          | Casey Eye Institute             | 3                 | 97              | 0              | 0              | 0                  | 0                 | 3          | Jocelyn Hui             | 47693        |
| CEI Pediatric Ophthalmology     | Casey Eye Institute             | 92                | 1               | 4              | 0              | 89                 | 7                 | 3          | Julie Coleman           | 43079        |
| CEI Retina                      | Casey Eye Institute             | 44                | 0               | 0              | 0              | 106                | 4                 | 3          | Yollanda Foster         | 47891        |
| CEI The Dalles                  | Casey Eye Institute             | 0                 | 0               | 0              | 0              | 0                  | 0                 | 3          | Rebecca Cimmiyotti      | 541-298-5144 |
| CEI Uveitis                     | Casey Eye Institute             | 21                | 2               | 0              | 0              | 15                 | 0                 | 3          | Janai Barth             | 4-0911       |



# Practice Manager Dashboard

### Utilization for the Next 7 Days

| Provider/Resource          | Today | Mon  | Tue  | Wed  | Thu  | Fri  | Mon  |
|----------------------------|-------|------|------|------|------|------|------|
| Delcambre, Macey R, MD     | -     | -    | -    | -    | 100% | -    | -    |
| DRM GRENZ RAY              | 100%  | -    | 100% | 100% | -    | 100% | -    |
| DRM LASER EXCIMER          | 22%   | -    | 27%  | -    | -    | 22%  | -    |
| DRM SPECTRA BOOTH          | -     | -    | -    | 16%  | -    | 41%  | -    |
| Fett, Nicole M, MD         | -     | 100% | -    | -    | -    | 120% | -    |
| Goesser, Megan R, MD       | -     | -    | 100% | -    | -    | -    | -    |
| Hanifin, Jon, MD           | -     | -    | 107% | -    | 100% | -    | -    |
| Hare, Anna Q, MD           | -     | -    | -    | -    | -    | -    | 116% |
| Johnson, Mariah M, MD      | -     | 116% | -    | -    | -    | -    | 83%  |
| Keller, Jesse J, MD        | -     | 91%  | -    | 100% | 0%   | -    | 20%  |
| Leachman, Sancy A, MD, PhD | -     | 100% | -    | -    | -    | -    | -    |
| Majerus, Matthew E, MD     | -     | -    | 110% | -    | -    | -    | -    |
| Minitier, Una C, MD        | -     | -    | -    | 100% | 100% | 100% | -    |
| Morrison, Lynne, MD        | 100%  | 120% | 100% | 100% | -    | 100% | -    |
| Olsen, Keith C, MD, PhD    | -     | -    | 112% | -    | -    | -    | -    |
| Onoday, Heather M, NP      | 90%   | -    | -    | -    | -    | -    | -    |
| Parker, Franklin, MD       | 133%  | 125% | 115% | 110% | 103% | -    | -    |
| Pena, Zachary, MD          | -     | 100% | -    | -    | -    | -    | 100% |
| Sanders, Kim Biggs, PA     | 96%   | -    | 103% | 160% | -    | 96%  | -    |
| Simpson, Eric, MD          | -     | -    | -    | -    | -    | -    | 106% |
| Smith, Jessica A, MD       | -     | -    | -    | -    | 100% | -    | -    |
| Totte, Susan, FNP          | 110%  | -    | 105% | -    | 100% | 100% | -    |
| White, Kevin P, MD         | -     | 111% | -    | -    | -    | -    | 100% |

Data collected: Fri 1/22 02:48 PM  
Refresh as of 02:48:38 PM

### Providers' Schedule Availability for Today

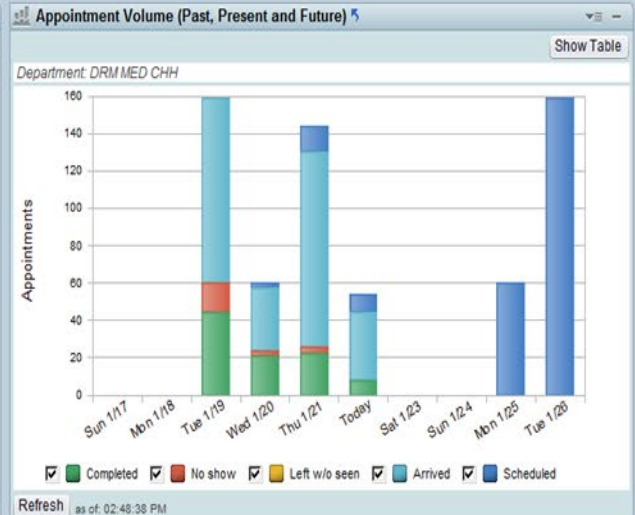
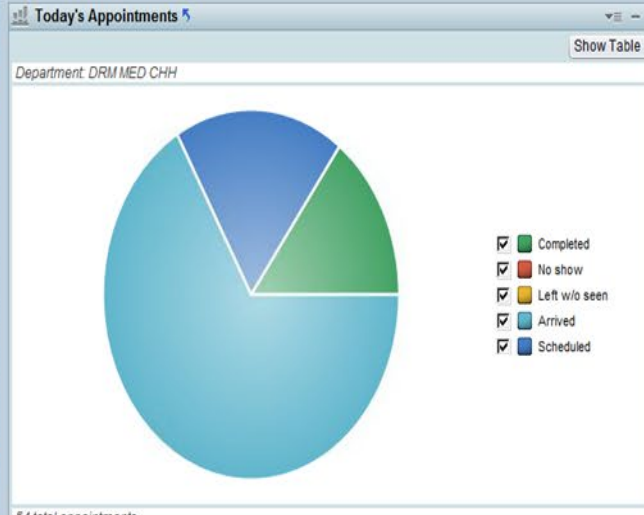
| Department  | Open Hours | Total Hours | % Open |
|-------------|------------|-------------|--------|
| DRM MED CHH | 2          | 15          | 11%    |

Data collected: Fri 1/22 02:48 PM  
Refresh as of 02:48:38 PM

### Providers' Schedule Availability for the Next 7 Days

| Department  | Open Hours | Total Hours | % Open |
|-------------|------------|-------------|--------|
| DRM MED CHH | 5          | 116         | 5%     |

Data collected: Fri 1/22 02:48 PM  
Refresh as of 02:48:38 PM



### Referrals Workqueues

The data source returned no results.

Report: OHSU PM Referral Workqueues

Report completed: Fri 1/22 02:48 PM  
Refresh as of 02:49:29 PM [View Report](#)

### Short Notice (<24hrs) Cancellations

[Show Graph](#)

| Canc Reason                     | Total Appointments |
|---------------------------------|--------------------|
| Short Notice < 24 Hours-Patient | 10                 |
| <b>Total count</b>              | <b>10</b>          |

Report completed: Fri 1/22 02:48 PM  
Refresh as of 02:48:58 PM [View Report](#)

### Wait Times from Check In to Rooming

Department: DRM MED CHH

| Waiting Patients   | Wait Time |
|--------------------|-----------|
| Alison B. Heavener | 4 min     |
| Jennifer Pepe      | 243 min   |

Recent average: 2 min

Waiting patients are not yet included in the average.  
Refresh as of 02:48:38 PM







## Monthly Measures

1. Referral Metrics
2. Patient Access Scorecard
3. Patient Experience Scorecard

# Referral report- 2 and 4 day

|        |         |                  |                  |
|--------|---------|------------------|------------------|
| Dates  | 4/28/17 | 04/22-04/28/2017 | 04/22-04/28/2017 |
| Target |         | 80%              | 80%              |

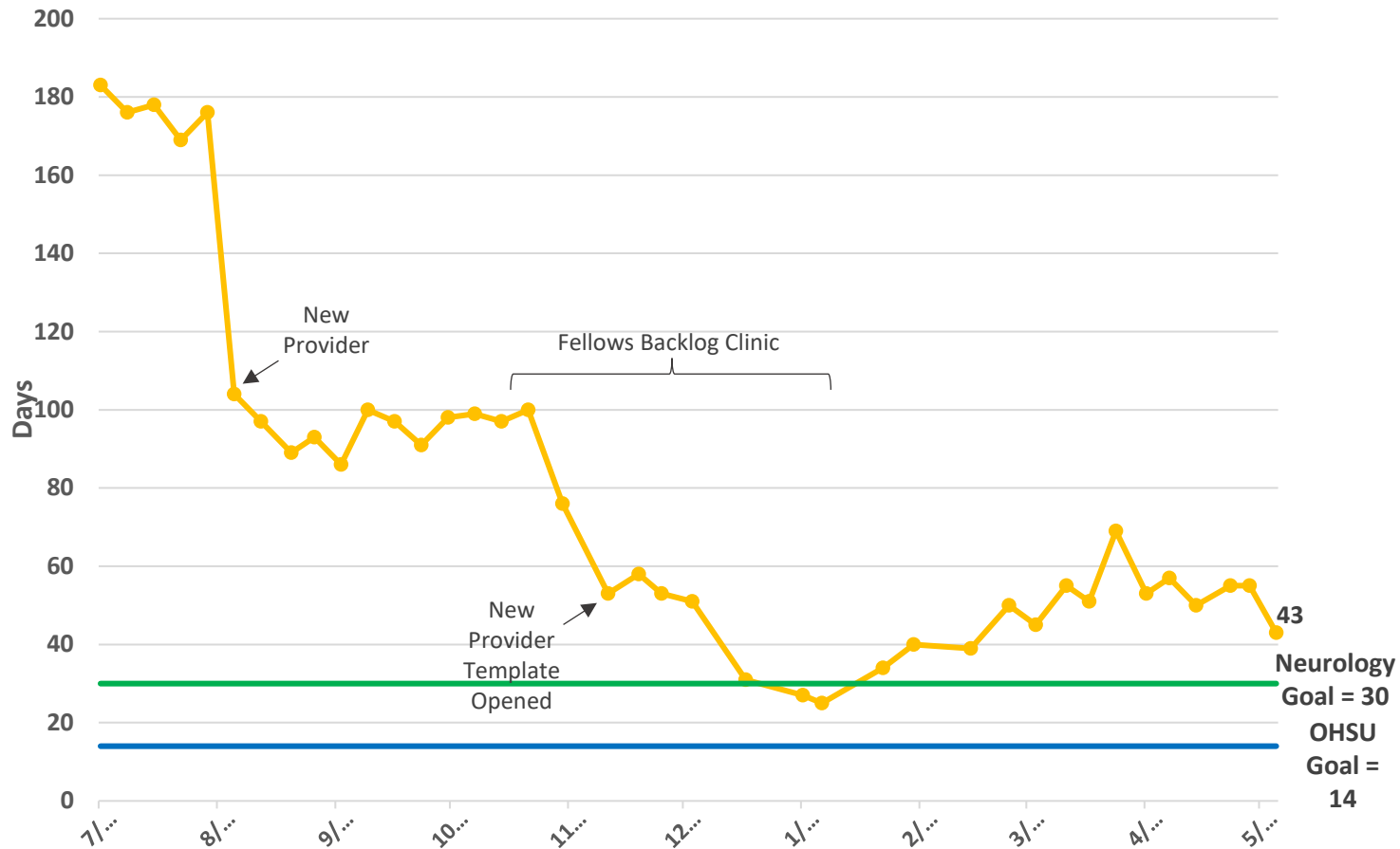
| Row Labels               | To Schedule   | 2 Day Metrics Internal | 4 Day Metrics Internal | N of Internal | N of External |
|--------------------------|---------------|------------------------|------------------------|---------------|---------------|
| + Anesthesia             | 68            | 95.5%                  | 96.4%                  | 222           | 140           |
| + Casey                  | 318           | 58.2%                  | 79.7%                  | 79            | 88            |
| + Dermatology            | 161           | 73.4%                  | 89.9%                  | 109           | 64            |
| - Diagnostics            | 235           | --                     | --                     | 0             | 2             |
| - (blank)                | 235           | --                     | --                     | 0             | 2             |
| Interventional Radiology | 235           | --                     | --                     | 0             | 2             |
| + Family Medicine        | 43            | 72.7%                  | 88.6%                  | 44            | 3             |
| + Genetics               | 49            | 94.7%                  | 84.2%                  | 19            | 31            |
| + Knight Cardio          | 74            | 89.6%                  | 89.6%                  | 67            | 19            |
| + Knight Oncology        | 114           | 90.1%                  | 90.1%                  | 101           | 49            |
| + Medicine               | 1,740         | 82.0%                  | 82.4%                  | 245           | 164           |
| + Neurology              | 322           | 94.9%                  | 61.0%                  | 59            | 123           |
| + Neurosurgery           | 81            | 92.6%                  | 81.5%                  | 27            | 25            |
| + Nutrition              | 79            | 80.6%                  | 92.5%                  | 67            | 5             |
| + Ob/ GYN                | 149           | 86.3%                  | 91.3%                  | 160           | 52            |
| + Orthopedics            | 132           | 95.0%                  | 98.0%                  | 100           | 19            |
| + Otolaryngology         | 199           | 87.7%                  | 83.8%                  | 130           | 80            |
| + Pediatrics             | 835           | 88.1%                  | 67.8%                  | 59            | 282           |
| + Psychiatry             | 277           | 86.7%                  | 90.7%                  | 75            | 51            |
| + Rehab                  | 1,573         | 71.3%                  | 92.4%                  | 436           | 9             |
| + Surgery                | 502           | 71.1%                  | 82.5%                  | 114           | 62            |
| + Urology                | 77            | 71.9%                  | 84.4%                  | 32            | 11            |
| + CDRC                   | 5,985         | 56.9%                  | 24.8%                  | 109           | 122           |
| + Oral & Maxillofacial   | 52            | 100.0%                 | 72.7%                  | 22            | 60            |
| <b>Grand Total</b>       | <b>13,065</b> | <b>80.8%</b>           | <b>84.8%</b>           | <b>2,276</b>  | <b>1,461</b>  |

# 3<sup>rd</sup> Next Available Appointments for OHSU SOM - FY18 July and FY18 May

| OHSU Clinical Department | 3 <sup>rd</sup> Next Available New -<br>FY18 July | 3 <sup>rd</sup> Next Available New -<br>FY18 May |
|--------------------------|---|--|
| Anesthesiology           | 44  | 29   |
| Casey Eye Institute      | 18  | 18   |
| Dermatology              | 38  | 26   |
| Family Medicine          | 20  | 29   |
| Medicine                 | 38  | 30   |
| Medical Genetics         | TBD   | TBD  |
| Neurology                | 140   | 57   |
| Neurosurgery             | 34  | 24   |
| OB/GYN                   | 50  | 38   |
| Orthopedics              | 14  | 9  |
| Otolaryngology           | 14  | 14   |
| Pediatrics               | 36  | 29   |
| Radiation Medicine       | 2   | 2  |
| Rehabilitation Services  | 16  | 6  |
| School of Nursing        | 51  | 38   |
| Surgery                  | 10  | 14   |
| Urology                  | 27  | 22   |



# General Neurology Third Next Available Appointments (Median)



# OHSU Neurology Partner Referral Volume

| OHSU Neurology Partners - Transferred Referrals (1/1/2018-5/22/2018) |             |            |                |                 |
|--|-------------|------------|----------------|-----------------|
| OHSU Partners  | Transferred | Accepted   | Scheduled/Seen | Acceptance Rate |
| Tuality Neurology  | 72          | 67         | 67             | 93%             |
| East Portland Neurology<br>(Adventist Campus)                        | 38          | 33         | 23             | 87%             |
| <b>Total</b>   | <b>110</b>  | <b>100</b> | <b>90</b>      | <b>91%</b>      |

Dec, 2016-Dec, 2017 – Roughly 635 referrals sent to Tuality with ~70% Acceptance Rate

# What can I do to Improve Access?

- Remove complexity and hierarchy within templates (blocks, holds and private time)
- Level load clinic days
- Remove backlogs
- Understand/Match capacity and demand
- Focus in on A.S.C principle:
  - How many appointments do we have **available**?
  - How many appointments were **scheduled** into the available time?
  - How many appointments were **completed**?



# Patient Experience Update

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DATE: August 30, 2018 PRESENTED BY: Banning Hendriks

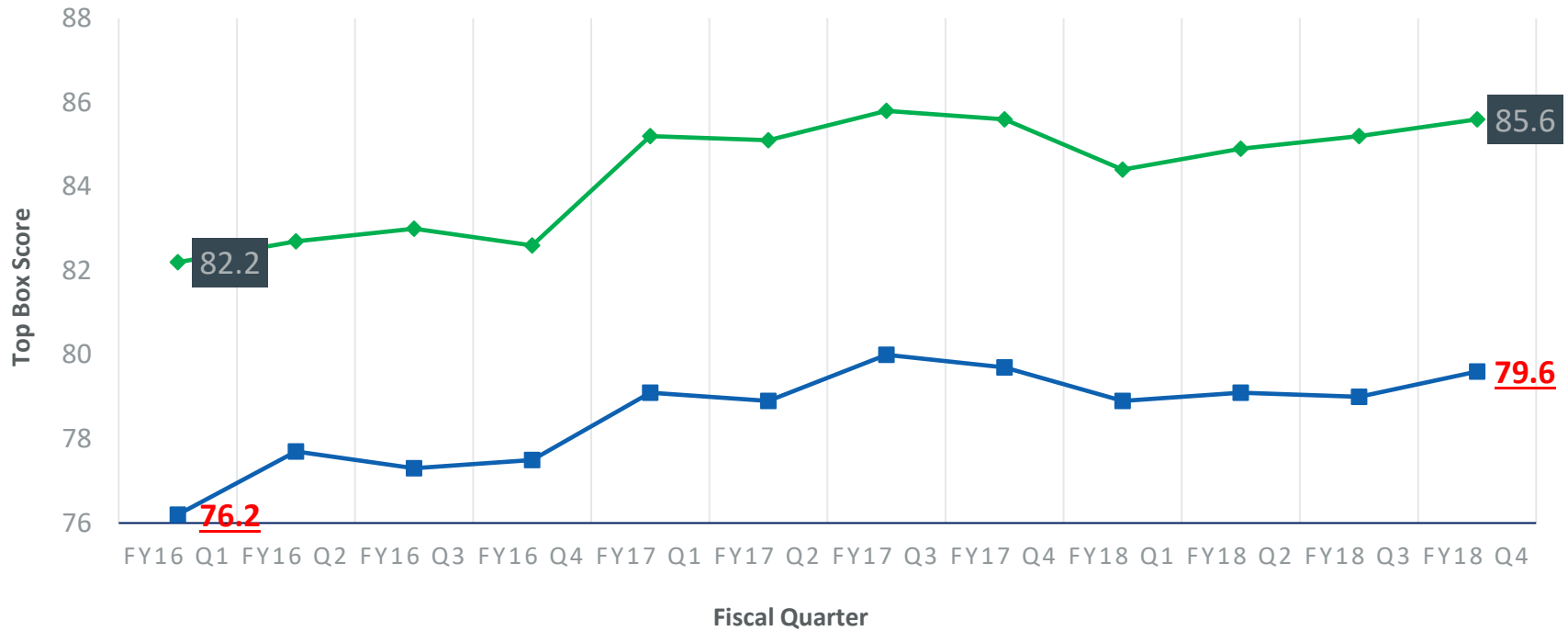


# Patient Experience

Within the past three fiscal years, the OHSU Medical Practice has seen significant improvement in our patient experience scores.

OHSU MEDICAL PRACTICE PRESS GANEY TOP BOX RANKINGS FY16 – FY18

Overall Score Likelihood to Recommend





Human understanding.



getwell | **Rounds+**



Timely.

Relevant.

Actionable.

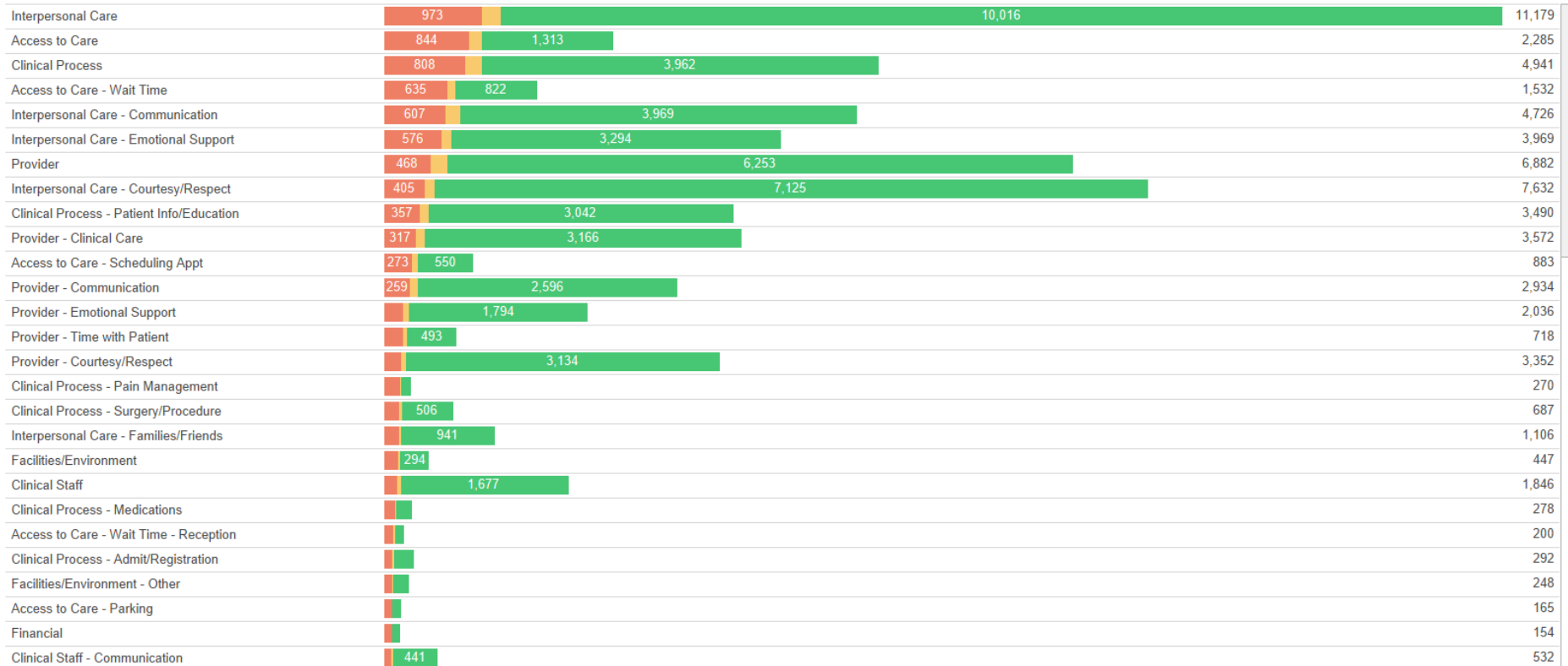


# Qualitative

■ Negative
 ■ Neutral
 ■ Positive

Respondents

14,863



\* Only comment categories with sentiment assigned are included in the counts for this dashboard. All comments are available to read once drilled through to the Feedback report.





# Reflections: *Why Have We Been Successful to Date*

## Consistency of Message:

- Focus of improving patient experience has evolved, but not changed since inception

## Use of Daily Management Systems:

- The use of (Huddles, Visual Management, Performance Improvement Rounding, Kata and Leadership Rounding) have begun to change practice managers into problem solvers as opposed to fire fighters

## Engagement:

- School of Medicine Departments have bought into the process, and view themselves as one practice as opposed to many. Practices all participate in quarterly Practice Optimization sessions, where new concepts are rolled out and reinforced

## Data:

- Information (patient comments, scorecards, priority index) is provided on a weekly/monthly basis and introduction of control charts



## Quarterly Measures

1. Physician Productivity Benchmarking (OFA Tool)
2. Quarterly Operating Reviews

# Productivity Report



## Faculty Productivity Report: Quarter Detail - Clinical

As of FY 2017-Q2 (October 2016 - December 2016)

**Fiscal Quarter:** 2017-Q2  
**Executive:** School of Medicine  
**Department:** SM Surgery  
**Division:** SM Abdominal Organ Transplant  
**Display Clinical Individual (No):**  
**Productivity Specialty:** All Specialties  
**Provider Name:** All Providers

**Period Type:** Quarter  
**Report Type:** Clinical  
**Faculty Type:** All  
**Display No Benchmark Faculty:** No  
**Display Notes:** Yes  
**Display Legend:** Yes

Page: 1  
 Report Date: 04/18/2017 09:28  
 DW Refresh: #####  
 User: christms

Purpose: Provide transparency into FTE buy-downs for providers who are externally funded, and to compare physician production levels to appropriate benchmarks in order to understand current production opportunities within each department or division.

Less: Benchmark 3 Year Average:  
(2014 - 2016)

| Last Name   | First Name | Specialty           | Faculty Rank | Emp Start Date | Emp Term Date | FTE   | Institutionally Funded Course Director | Explicitly Funded Medical Director | Externally Funded Research - Note 1 | Director/ Department Chair/Division Chief | Residency Program Director | Externally Funded Admin. Duties (Specifically in Y Comp.) | Time Purchased by VA | Direct State Support | Time Funded By Contracts | Time Funded By Other OHSU Entities - Note 2 | CFTE (Calculated) | Total wRVUs | wRVUs / CFTE | 50th % (per qtr.) | 75th % (per qtr.) | wRVU Opportunity |   |
|---|------------|---------------------|--------------|----------------|---------------|-------|--|------------------------------------|-------------------------------------|---|----------------------------|---|----------------------|----------------------|--------------------------|---|-------------------|-------------|--------------|-------------------|-------------------|------------------|---|
|   |            |                     |              |                |               |       |  |                                    |                                     |   |                            |   |                      |                      |                          |   |                   |             |              |                   |                   |                  | OFAT Data Entry: ohsu active directory/valadez Responsible: |
| <b>SM Surgery</b>   |            |                     |              |                |               |       |  |                                    |                                     |   |                            |   |                      |                      |                          |   |                   |             |              |                   |                   |                  |   |
| <b>Physicians</b>   |            |                     |              |                |               |       |  |                                    |                                     |   |                            |   |                      |                      |                          |   |                   |             |              |                   |                   |                  |   |
| Enestvedt   | Charles    | Surgery: Transplant | A            | 09-05-13       |               | 1.000 | 0.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 0.340                | 0.000                | 0.000                    | 0.420                                       | 0.240             | 606         | 2,527        | 1,649             | 2,124             |                  |   |
| Maynard   | Erin       | Surgery: Transplant | A            | 07-20-15       |               | 1.000 | 0.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 0.340                | 0.000                | 0.000                    | 0.420                                       | 0.240             | 611         | 2,546        | 1,649             | 2,124             |                  |   |
| Orloff  | Susan*     | Surgery: Transplant | Cl           | 06-19-95       |               | 0.875 | 0.000                                  | 0.100                              | 0.042                               | 0.200                                     | 0.000                      | 0.000   | 0.450                | 0.000                | 0.000                    | 0.000                                       | 0.083             | 993         | 11,965       | 1,649             | 2,124             |                  |   |
| Roayaie   | Kayvan     | Surgery: Transplant | A            | 10-27-10       |               | 1.000 | 0.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 0.340                | 0.000                | 0.000                    | 0.440                                       | 0.220             | 309         | 1,405        | 1,649             | 2,124             |                  |   |
| Scott   | David      | Surgery: Transplant | CAP          | 07-11-05       |               | 1.000 | 0.000                                  | 0.200                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 0.480                | 0.000                | 0.000                    | 0.280                                       | 0.040             | 604         | 15,098       | 1,649             | 2,124             |                  |   |
| <b>Total Physicians SM Abdominal Organ Transplant CFTE</b>          |            |                     |              |                |               |       | 4.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 1.950                | 0.000                | 0.000                    | 1.560                                       | 0.823             | 3,123       | 3,795        | 1,649             | 2,124             | 0                |   |
| <b>Total Physicians SM Abdominal Organ Transplant (&lt;=1 CFTE)</b> |            |                     |              |                |               |       | 1.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 0.930                | 0.000                | 0.000                    | 0.280                                       | 0.123             | 1,597       | 12,984       | 1,649             | 2,124             | 0                | 0   |
| <b>Total Physicians SM Abdominal Organ Transplant (&gt;1 CFTE)</b>  |            |                     |              |                |               |       | 3.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 1.020                | 0.000                | 0.000                    | 1.280                                       | 0.700             | 1,526       | 2,181        | 1,649             | 2,124             | 0                | 0   |
| <b>SM Abdominal Organ Transplant CFTE</b>                           |            |                     |              |                |               |       | 4.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 1.950                | 0.000                | 0.000                    | 1.560                                       | 0.823             | 3,123       | 3,795        | 1,649             | 2,124             | 0                | 0   |
| <b>SM Abdominal Organ Transplant CFTE (&lt;=1 CFTE)</b>             |            |                     |              |                |               |       | 1.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 0.930                | 0.000                | 0.000                    | 0.280                                       | 0.123             | 1,597       | 12,984       | 1,649             | 2,124             | 0                | 0   |
| <b>SM Abdominal Organ Transplant CFTE (&gt;1 CFTE)</b>              |            |                     |              |                |               |       | 3.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 1.020                | 0.000                | 0.000                    | 1.280                                       | 0.700             | 1,526       | 2,181        | 1,649             | 2,124             | 0                | 0   |
| <b>Total SM Surgery CFTE</b>  |            |                     |              |                |               |       | 4.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 1.950                | 0.000                | 0.000                    | 1.560                                       | 0.823             | 3,123       | 3,795        | 1,649             | 2,124             | 0                | 0   |
| <b>Total SM Surgery CFTE (&lt;=1 CFTE)</b>                          |            |                     |              |                |               |       | 1.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 0.930                | 0.000                | 0.000                    | 0.280                                       | 0.123             | 1,597       | 12,984       | 1,649             | 2,124             | 0                | 0   |
| <b>Total SM Surgery CFTE (&gt;1 CFTE)</b>                           |            |                     |              |                |               |       | 3.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 1.020                | 0.000                | 0.000                    | 1.280                                       | 0.700             | 1,526       | 2,181        | 1,649             | 2,124             | 0                | 0   |
| <b>Grand Total</b>  |            |                     |              |                |               |       | 4.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 1.950                | 0.000                | 0.000                    | 1.560                                       | 0.823             | 3,123       | 3,795        | 1,649             | 2,124             | 0                | 0   |
| <b>Grand Total All Clinical Faculty CFTE (&lt;=1 CFTE)</b>          |            |                     |              |                |               |       | 1.875                                  | 0.000                              | 0.300                               | 0.042                                     | 0.200                      | 0.000   | 0.930                | 0.000                | 0.000                    | 0.280                                       | 0.123             | 1,597       | 12,984       | 1,649             | 2,124             | 0                | 0   |
| <b>Grand Total All Clinical Faculty CFTE (&gt;1 CFTE)</b>           |            |                     |              |                |               |       | 3.000                                  | 0.000                              | 0.000                               | 0.000                                     | 0.000                      | 0.000   | 1.020                | 0.000                | 0.000                    | 1.280                                       | 0.700             | 1,526       | 2,181        | 1,649             | 2,124             | 0                | 0   |



# Quarterly Operating Review Scorecard

Service Lines > Cardiovascular Service Line

November 2016

|   | Measure | + Add Measure   | Desired Trend | Sep       | Oct       | Nov       | November Goal | FYTD    | FYTD Goal | Prior FYTD |
|---|---------|---|---------------|-----------|-----------|-----------|---------------|---------|-----------|------------|
|   | Quality | U Mortality Rate Index O:E                            | ↓             | ✗ 1.05    | ✓ 0.71    | ✗ 1.16    | 0.79          | 0.87    | 0.79      | 1.07       |
|   | Quality | 30 Day ALL CAUSE Readmission Rate                     | ↓             | ✓ 11%     | ⚠ 14%     |           | 14%           | 12%     | 14%       | 16%        |
|   | Quality | ACC-NCDR Point Estimate                               | ↑             | ✗ 5.50    | ✗ 5.50    | ✗ 5.50    | 12.00         | 5.50    | 12.00     | 4.00       |
|   | Quality | STS Point Estimate                                    | ↑             | ✗ 1.00    | ✗ 1.00    | ✗ 1.00    | 8.00          | 1.00    | 8.00      | 1.50       |
|   | People  | Employee Turnover (Excluding Internal Transfers)      | ↓             | ✓ 1.22%   | ✗ 2.60%   | ✓ 1.33%   | 1.58%         | 11%     | 7.90%     | 3.18%      |
| + | Service | % Clinic No Show                                      | ↓             | ⚠ 8.37%   | ✗ 9.64%   | ✓ 7.81%   | 8.23%         | 8.97%   | 8.23%     | 8.29%      |
|   | Service | % New Patients Seen in Less Than 14 Days              | ↑             | ✓ 72.7%   | ✗ 60.3%   | ✗ 62.3%   | 70.0%         | 70.3%   | 70.0%     | 74.9%      |
|   | Service | CGCAHPS Satisfaction (%Tile/N)                        | ↑             | ✗ 44/143  | ✓ 80/143  | ✗ 53/181  | 75            | 62/752  | 75        | 47/909     |
| + | Service | U Inpatient Satisfaction (%Tile/N)                    | ↑             | ✗ 53/30   | ✗ 51/33   | ✗ 61/36   | 75            | 60/159  | 75        | 51/121     |
| + | Service | Ancillary Testing Satisfaction (%Tile/N)              | ↑             | ⚠ 69/39   | ✓ 88/36   | ✗ 15/39   | 75            | 67/203  | 75        | 71/139     |
| + | Growth  | Patient Days  | ↑             | ✓ 928     | ✓ 924     | ✓ 954     | 885           | 4,684   | 4,427     | 4,532      |
| + | Growth  | Clinic Visits   | ↑             | ✓ 1,506   | ⚠ 1,430   | ✓ 1,439   | 1,413         | 7,355   | 7,225     | 7,115      |
|   | Growth  | Outreach Volumes (total patients seen)                | ↑             | ✓ 173     | ✗ 113     | ⚠ 161     | 163           | 730     | 815       | 826        |
| + | Finance | Salary & Benefits Cost/APD                            | ↓             | ✓ \$567   | ✓ \$620   | ✓ \$616   | \$698         | \$601   | \$687     | \$682      |
| + | Finance | Supply Cost/Cath Case                                 | ↓             | ✗ \$4,078 | ✗ \$3,580 | ✓ \$3,533 | \$4,348       | \$3,664 | \$3,734   | \$3,214    |
|   | Finance | Paid FTE per AOB (Excluding Residents)                | ↓             | ✓ 2.62    | ✓ 2.87    | ✓ 2.74    | 3.15          | 2.80    | 3.15      | 3.31       |
| + | Finance | Net Operating Income (Loss) before Other Costs - I... | ↑             | ✓ \$1,650 | ✓ \$1,761 | ✓ \$1,666 | \$1,371       | \$8,510 | \$6,933   | \$7,261    |



# Off-Track Metrics

Red Metrics for 3+ Months

| Red Metrics for 3+ Consecutive Months | PI Improvements Summary | Initiative Start Date |
|---------------------------------------|-------------------------|-----------------------|
| 1)                                    |                         |                       |
| 2)                                    |                         |                       |
| 3)                                    |                         |                       |
| 4)                                    |                         |                       |

Sample

# Financial Performance

## YTD/MTD

| SOM        | MTD | Prior MTD | MTD Budget | MTD vs. Bud Var. | YTD | Prior YTD | YTD Budget | YTD vs Bud Var. |
|------------|-----|-----------|------------|------------------|-----|-----------|------------|-----------------|
| Revenues   |     |           |            |                  |     |           |            |                 |
| Expenses   |     |           |            |                  |     |           |            |                 |
| Income     |     |           |            |                  |     |           |            |                 |
| One-Timers |     |           |            |                  |     |           |            |                 |

| Hospital & Clinics | MTD | Prior MTD | MTD Budget | MTD vs. Bud Var. | YTD | Prior YTD | YTD Budget | YTD vs Bud Var. |
|--------------------|-----|-----------|------------|------------------|-----|-----------|------------|-----------------|
| Revenues           |     |           |            |                  |     |           |            |                 |
| Expenses           |     |           |            |                  |     |           |            |                 |
| Income             |     |           |            |                  |     |           |            |                 |
| One-Timers         |     |           |            |                  |     |           |            |                 |

Sample

# Strategy

|  | Summary                                   |
|--|---|
| Recruitments                             | OHSU-<br>Tuality-<br>Adventist-<br>Etc... |
| Top Strategic<br>Initiatives<br>Progress | 1)<br>2)<br>3)                            |
| Market Intel/<br>Competitors             |   |
| Other...                                 |   |

Sample

# Top 5 Issues Summary

(Risks, Opportunities, Resource Needs, Good News, etc...)

| Issue | Summary |
|-------|---------|
| 1)    |         |
| 2)    |         |
| 3)    |         |
| 4)    |         |
| 5)    |         |

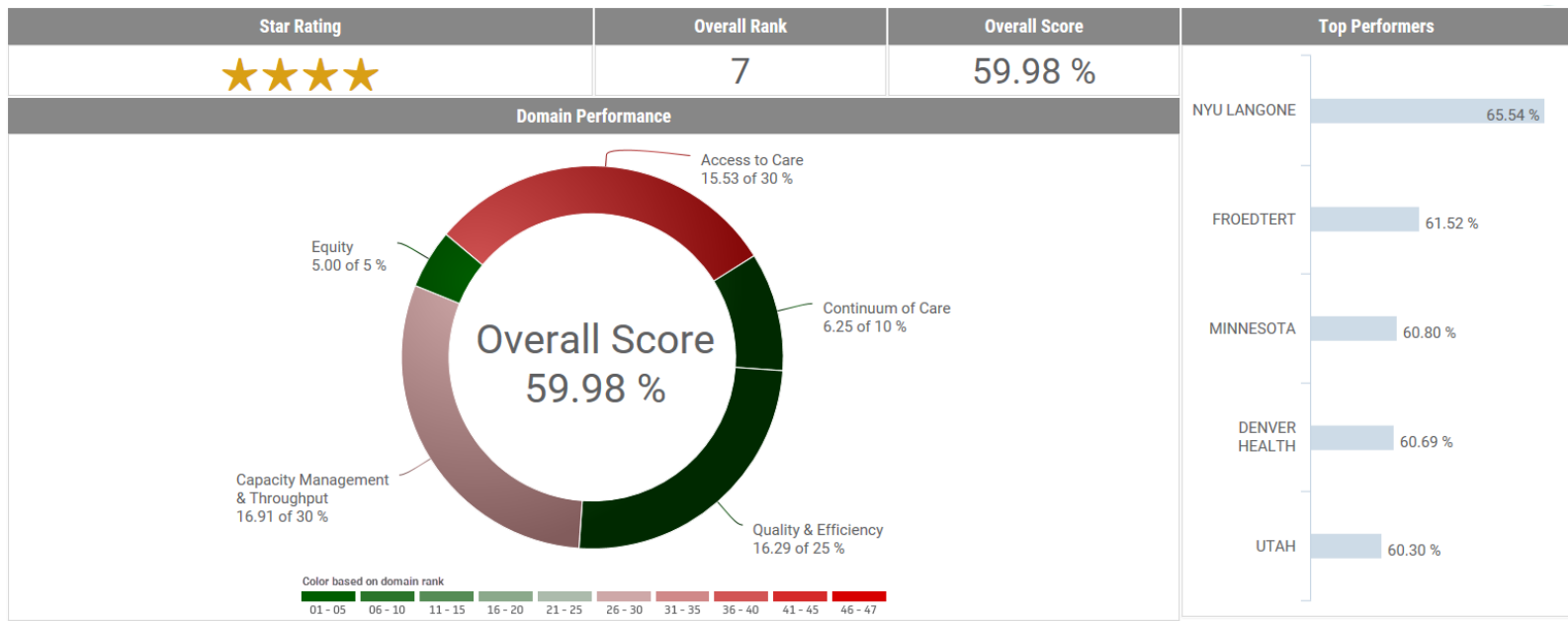


## External Measures

1. Vizient Ambulatory Quality & Accountability Scorecard
2. Action OI



# Vizient Ambulatory Quality & Accountability Scorecard



# Performance by Domain

|                                  | Q&A Study Year  |                 | 2016 Overall and Domain Performance Distribution |
|----------------------------------|-----------------|-----------------|--|
|                                  | 2015            | 2016            |  |
|                                  | Score (Rank)    |                 |  |
| Overall                          | 58.96 %<br>(15) | 59.98 %<br>(7)  | --- Vizient Median: 57.32 %                      |
| Access to Care                   | 53.24 %<br>(26) | 51.76 %<br>(37) | --- Vizient Median: 56.91 %                      |
| Continuum of Care                | 59.38 %<br>(13) | 62.50 %<br>(9)  | --- Vizient Median: 56.81 %                      |
| Quality & Efficiency             | 63.94 %<br>(5)  | 65.17 %<br>(7)  | --- Vizient Median: 56.50 %                      |
| Capacity Management & Throughput | 53.55 %<br>(27) | 56.37 %<br>(26) | --- Vizient Median: 64.00 %                      |
| Equity                           | 100.00 %<br>(1) | 100.00 %<br>(1) | --- Vizient Median: 64.00 %                      |

Rank:  
37/47

# Access to Care

| Metric/Sub-metric   | 2015                           |                                | 2016                                       | 2016   |
|---|--------------------------------|--------------------------------|--|--|
|   | Metric weighted score          | Metric weighted score          | Performance Details<br>(num/denom) n=cases | Metric weighted score distribution                               |
|   | Sub-metric Performance (Score) | Sub-metric Performance (Score) |  | Sub-metric Performance score ranges                              |
| New Patient Visits<br>(17 submetrics)<br>Units: %                           | 3.97 of 6 %                    | 3.88 of 6 %                    |  | <div style="text-align: right;">--- Vizient Median: 3.35 %</div> |
| New Patients Seen in 7 Days<br>(17 submetrics)<br>Units: %                  | 6.18 of 12 %                   | 5.91 of 12 %                   |  | <div style="text-align: right;">--- Vizient Median: 6.62 %</div> |
| Appointments Cancelled by<br>Provider/Clinic<br>(17 submetrics)<br>Units: % | 5.82 of 12 %                   | 5.74 of 12 %                   |  | <div style="text-align: right;">--- Vizient Median: 6.97 %</div> |

Facility: Oregon Health & Science University  
 Standard Department: 02269, Orthopedic Clinic  
 Department: 31211, HC.FPP ORTHOPEDICS CLINIC  
 Compared to: UHC Major Teach Trauma Level 1

Custom Comparison Report  
 Quarterly Period - 4Q 2017



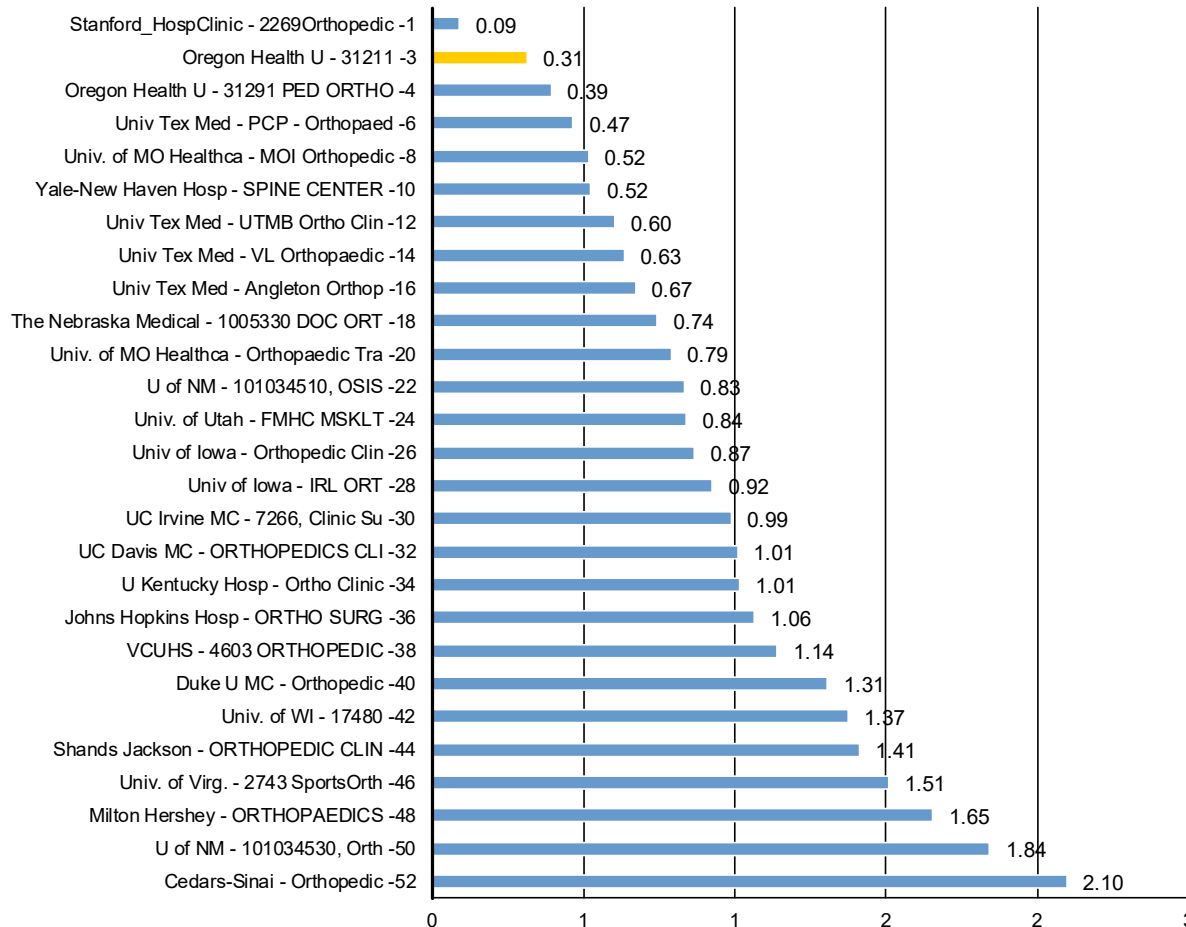
| Measure                                     | Host Value |            | Percentile |            |            | Host Percent Rank | Sample Size | Gap %     | Opportunity \$ |
|---|------------|------------|------------|------------|------------|-------------------|-------------|-----------|----------------|
|   | 3Q 2017    | 4Q 2017    | 25th       | 50th       | 75th       |                   |             |           |                |
| <b>Dept Operating Statistics</b>            |            |            |            |            |            |                   |             |           |                |
| Patient Examination Spaces                  | 39.00      | 34.00      | 9.00       | 12.00      | 18.00      | 95.00 %           | 41          | b         | b              |
| Patient Visits                              | 9,987.00   | 10,044.00  | 2,850.52   | 3,305.00   | 6,274.53   | 88.10 %           | 43          | b         | b              |
| APC Relative Weight                         | 26,926.36  | 26,813.05  | 3,552.45   | 5,477.18   | 8,300.75   | b                 | 44          | b         | b              |
| Labor Expense                               | 200,948.22 | 187,473.44 | 119,935.98 | 177,507.00 | 257,330.85 | 56.82 %           | 45          | b         | b              |
| Overtime Salary Expense                     | 1,328.66   | 799.32     | 508.59     | 1,216.90   | 2,796.15   | 34.48 %           | 30          | b         | b              |
| Medical Supply Expense                      | 95,270.47  | 133,906.71 | 5,721.66   | 15,716.45  | 32,180.62  | b                 | 43          | b         | b              |
| Total Hours Worked                          | 8,406.31   | 7,266.48   | 3,506.47   | 5,130.80   | 8,256.40   | 65.12 %           | 44          | b         | b              |
| Total Hours Paid                            | 8,450.58   | 8,214.50   | 4,217.31   | 5,893.46   | 9,421.43   | 65.12 %           | 44          | b         | b              |
| Total Supply Expense                        | 100,926.74 | 141,712.57 | 9,150.31   | 18,200.51  | 33,444.07  | b                 | 44          | b         | b              |
| Total Expense Non MD                        | 785,388.74 | 717,245.74 | 128,959.62 | 206,034.00 | 358,573.12 | 97.73 %           | 45          | b         | b              |
| <b>Facility Information</b>                 |            |            |            |            |            |                   |             |           |                |
| Area Wage Index (x100)                      | 118.78     | 117.44     | 93.09      | 96.98      | 109.26     | 90.24 %           | 42          | b         | b              |
| <b>Staff Configuration</b>                  |            |            |            |            |            |                   |             |           |                |
| Paid FTEs                                   | 16.25      | 15.80      | 8.11       | 11.33      | 18.12      | 65.12 %           | 44          | b         | b              |
| Skill Mix: Management %                     | 18.56      | 18.41      | 3.63       | 6.40       | 11.45      | 100.00 %          | 37          | b         | b              |
| Skill Mix: RN %                             |            |            | 6.80       | 21.50      | 31.89      |                   | 37          | b         | b              |
| Skill Mix: Other Patient Care Provider %    | 75.26      | 74.88      | 20.83      | 39.93      | 62.86      | 86.36 %           | 45          | b         | b              |
| Skill Mix: Other Support Staff %            | 6.19       | 6.71       | 7.86       | 16.83      | 37.45      | 20.00 %           | 41          | b         | b              |
| Hours Worked as % of Hours Paid             | 99.48      | 88.46      | 83.87      | 86.90      | 88.46      | 75.00 %           | 45          | 0.00 %    | 0.00           |
| Overtime Hours as % of Worked Hours: Non MD | 0.53       | 0.45       | 0.52       | 1.01       | 1.99       | 22.73 %           | 45          | b         | b              |
| <b>Workload / Service Intensity</b>         |            |            |            |            |            |                   |             |           |                |
| Patient Visits per Day                      | 109.45     | 110.07     | 29.05      | 36.22      | 68.76      | 88.10 %           | 43          | b         | b              |
| Patient Visits per Exam Space per Day       | 2.81       | 3.24       | 2.46       | 3.00       | 4.10       | 57.50 %           | 41          | 26.60 %   | 190,798.80     |
| APC Relative Weight per Patient Visit       | 2.70       | 2.67       | 1.30       | 1.59       | 1.89       | b                 | 43          | b         | b              |
| <b>Labor Productivity Ratios</b>            |            |            |            |            |            |                   |             |           |                |
| Hours Worked per Patient Visit              | 0.84       | 0.72       | 1.13       | 1.33       | 1.69       | 0.00 %            | 44          | -55.85 %  | 0.00           |
| Hours Worked per APC Relative Weight        | 0.31       | 0.27       | 0.57       | 0.89       | 1.24       | 0.00 %            | 45          | -111.70 % | 0.00           |
| Hours Paid per Patient Visit                | 0.85       | 0.82       | 1.34       | 1.54       | 1.92       | 0.00 %            | 44          | -83.43 %  | 0.00           |
| Hours Paid per APC Relative Weight          | 0.31       | 0.31       | 0.71       | 1.01       | 1.47       | 0.00 %            | 45          | -132.18 % | 0.00           |
| <b>Cost Ratios</b>                          |            |            |            |            |            |                   |             |           |                |
| Staff Average Rate per Hour                 | 23.78      | 22.82      | 20.50      | 24.56      | 27.77      | 34.88 %           | 44          | b         | 19,106.89      |
| Staff Average Rate AWI Adjusted per Hour    | 20.02      | 19.43      | 21.18      | 24.85      | 26.70      | 9.09 %            | 45          | -8.98 %   | b              |
| Labor Expense per Patient Visit             | 20.12      | 18.67      | 33.16      | 41.11      | 47.42      | 0.00 %            | 44          | b         | 0.00           |

\* Data based on small sample size.    <sup>a</sup> Insufficient unshared data for display.    <sup>b</sup> Calculation not applicable.



# Ortho Action OI Report

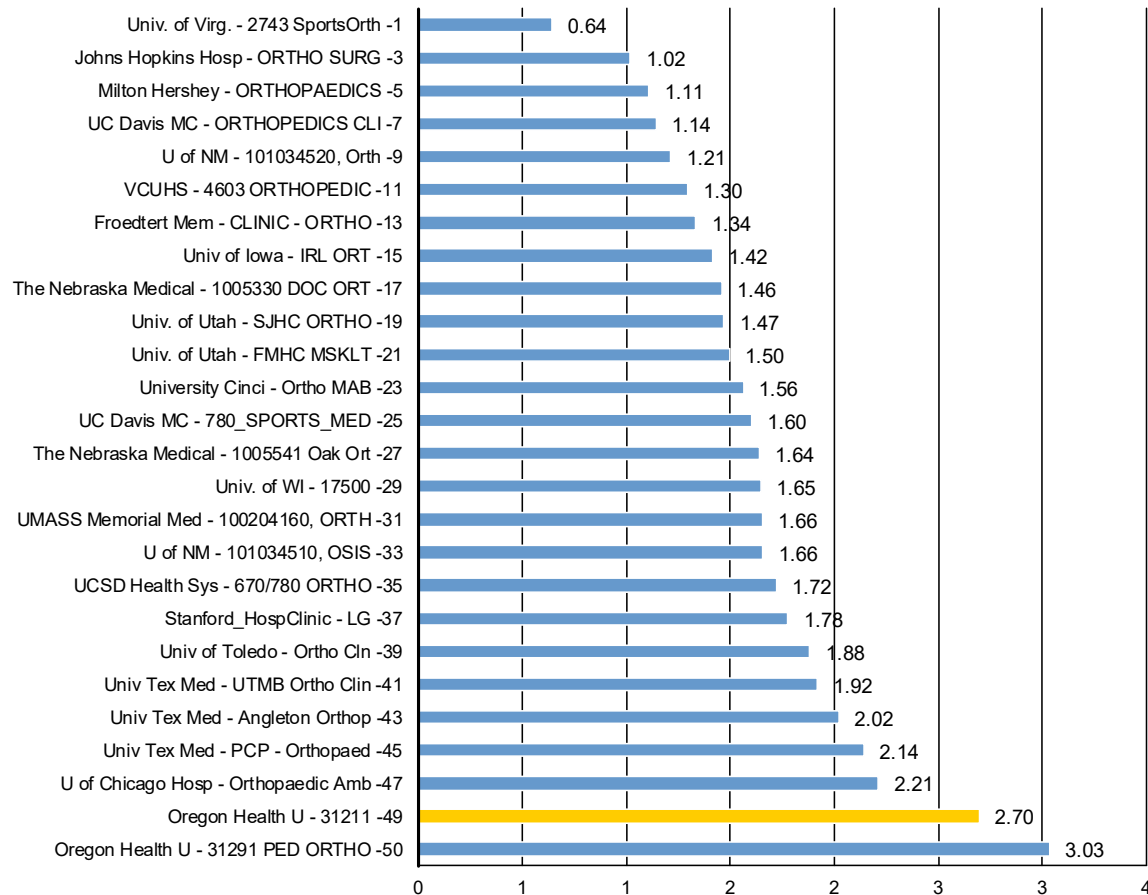
Hours Worked per APC Relative Weight





# Ortho Action OI Report

APC Relative Weight per Patient Visit



# Other Issues & Questions

1. Capacity v. Schedule v. Demand
2. How are temporary and overtime hours/expenses considered?
3. Confirm position types included (RN, LPN, practice managers, etc.) to determine variance in position types across institutions



Questions?



# Ambulatory Labor and Cost Management – Vizient

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# Labor Cost Management Assessment Ambulatory Clinics – Recommendation Discussion

**vizient**<sup>TM</sup>

# The normalization of clinics is based on key inputs from site visits and stakeholder interviews


| Factor                                 | 1-Low Impact   | 2-Med Impact  | 3- High Impact  | Comments   |
|--|--|---|---|--|
| Resident Ran Clinic Sessions           | <25%   | 25-50%  | >50%  | 1 <sup>st</sup> and 2 <sup>nd</sup> year residents see less pt/hr                                  |
| Limited Exam Rooms                     | No impact on throughput  | Some impact on throughput                                       | Significant impact on throughput                        | Limited exam rooms can cause provider to wait for next patient                                     |
| Multiple Clinic Sites                  | Single location  | 2-3 locations   | >3 locations  | Diminished economies of scale  |
| Affinity/Ability to flex staff         | Flex staff to full extent of union contract or policies              | “Request” staff to flex, or assign admin duties                 | Does not adjust staffing to volume changes              | Flexing staff allows manager to match resources to workload  |
| Impact of Vacant Positions             | Minimal open positions   | Few vacant position in process being filled                     | Several key positions open, with difficulty filling     | High turnover of staff leads to increase orientation pay   |
| Affinity to level load clinic sessions | Session are level loaded by day of week, time of day and by provider | Management attempts to level load but not completely successful | No attempt to level load, with push-back from providers | Partially filled sessions imply that clinic is not operating at capacity volume for allotted staff |



# Payroll and Volume data for a clinic should be comprehensive, and found in one cost center

- **All Clinics:** Continue with process of streamlining payroll hours and volume data to using a consistent data warehouse for accounting purposes
  - Bring payroll and volume stats should be managed through one process/system
  - Differentiate between direct vs indirect
  - Allocate appropriated shared services hours
  - Align Cost Centers

# Span of control methodology involves a clear, assessment with actionable outcomes

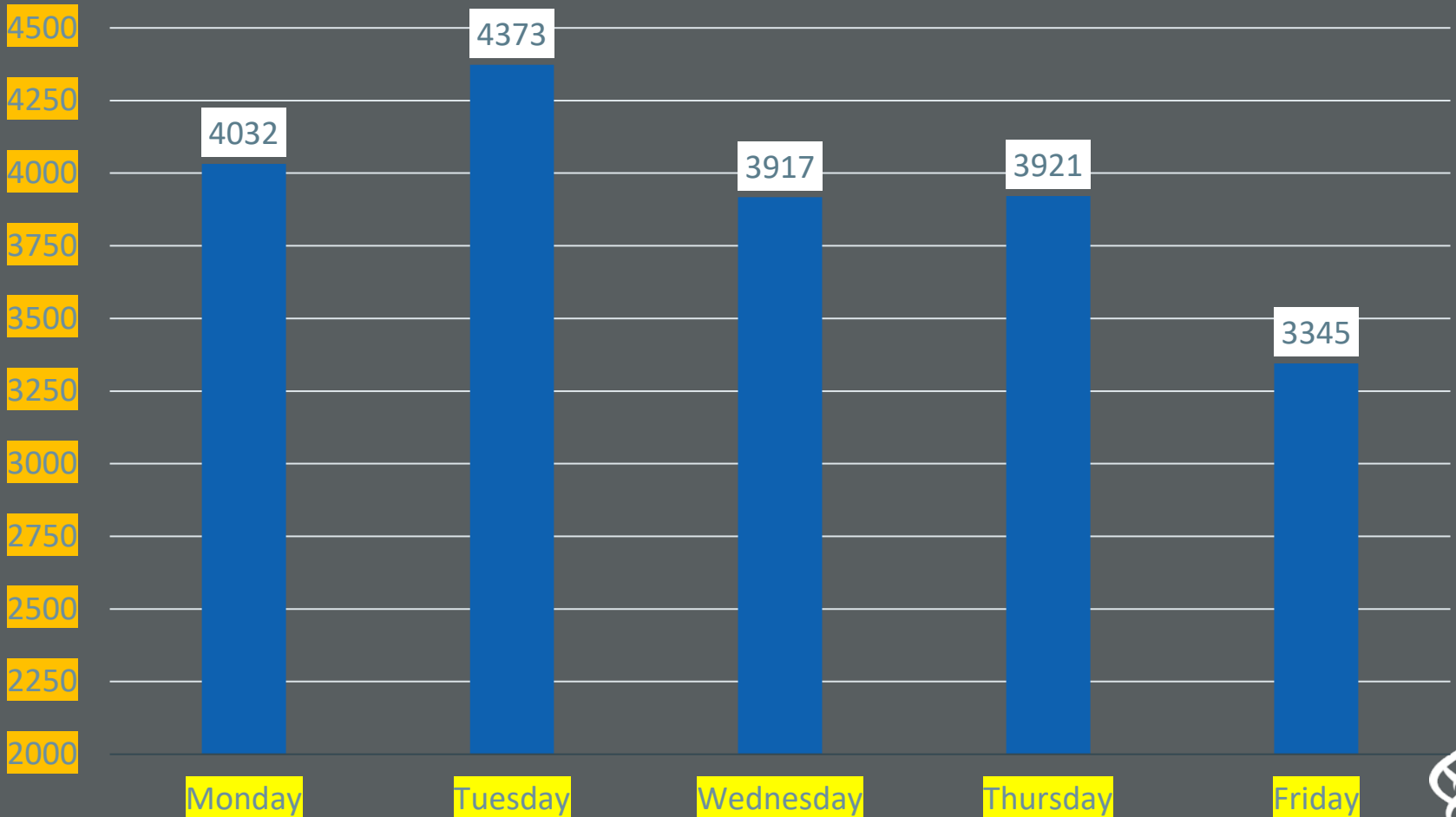
- All Clinics: Conduct span of control analysis utilizing Supervisor to FTE ratios to potentially reduce positions and streamline alignment of Clinic Administrator, Practice Manager, and other clinic lead positions.
    - Understanding job responsibilities and duties currently performed for each position (administrators, practice managers, other managers)
    - Measure number of direct reports and indirect, then compare ratio to internal and external benchmarks
    - Understand reporting relationships and organizational structure
- 
- Uniform managerial responsibilities by positions across clinics
  - Consistent range of direct and indirect reports per manager/administrator
  - Uniform and streamlined reporting structure by position, across clinics

# Level loading of clinic sessions and monitoring utilization of support staff would unlock further labor savings

- All Clinics: Document actual patient visits by providers, by day of the week, and in some instances by team or room. This will highlight the uneven patient loads across providers in a clinic.
- Assign clinical support staff like MAs and RNs to providers as per actual visit trend.
- Initiate task mapping of MAs and RNs to understand their actual direct patient care contribution, time, effort and utilization versus extrapolating utilization from their schedule.
- If needed, MAs and RNs should be shared among providers on a daily basis, based on actual visit volume for staff optimization, instead of set team structure.

# Make Every Day Tuesday!

OHSU Ambulatory Billable Visits FY18 March



# Clinics Recommendations

- **All Clinics:** Develop a culture of more precise staffing to workload, within framework of union agreement. Work to increase correlation coefficient between productive hours worked, and units of service.
- **All Clinics:** By partnering with Vizient, coach /educate Practice Managers so they can independently generate and use various reports including daily productivity. This should be done proactively, to stay on target
- **All Clinics:** Retroactive review and discussion of productivity should focus on longer term trends, strategy and inter-departmental coordination

# Clinics Recommendations

- **All Clinics:** Empower floor Sups / Leads to make staffing decision
- **All Clinics:** Crosstrain MAs as much as possible to utilize them across rooms and physician based teams. A balance should be struck between team based care model and staffing efficiency
- **Primary Clinics:** Partner with Vizient to enhance existing efforts to identifying the best practice staffing model for primary care clinics, addressing efficiency, but also value based principles (ie population health). Then work to standardize staffing patterns (with clinic specific targets).



# Clinics Recommendations

- **Hem/Onc and Neurology Clinics:** Continue along path to improve intake processes within centralized model between Neurology and Hem/Onc clinics, minimizing risk for error, and to increase efficiency of provider staff
- **All Clinics:** Improve position approval and replacement process by decreasing job vacancy to job posting time.
- **All Clinics:** Continue initiative to centralize check-in process, calculating a potential decrease in FTE's, applying towards savings and/or value based positions

# Clinics Recommendations

- **Primary Care Clinics:** Support efforts to centralized patient scheduling across primary care clinics, allowing for savings in FTE's as well as standardization of schedule templates and processes
- **Pediatrics (General and Specialty), Family Practice-Gabriel Park, Hem/Onc:** Decrease RN hours in clinics (those not at top of license) and realize savings and/or replace with less expensive staff (ie. utilize for care/gap coordination)
- **All Clinics:** Continue with process improvement methodologies and continued support for epic charting and template creation for providers.



Thank You