



ACCELERATED PERFORMANCE
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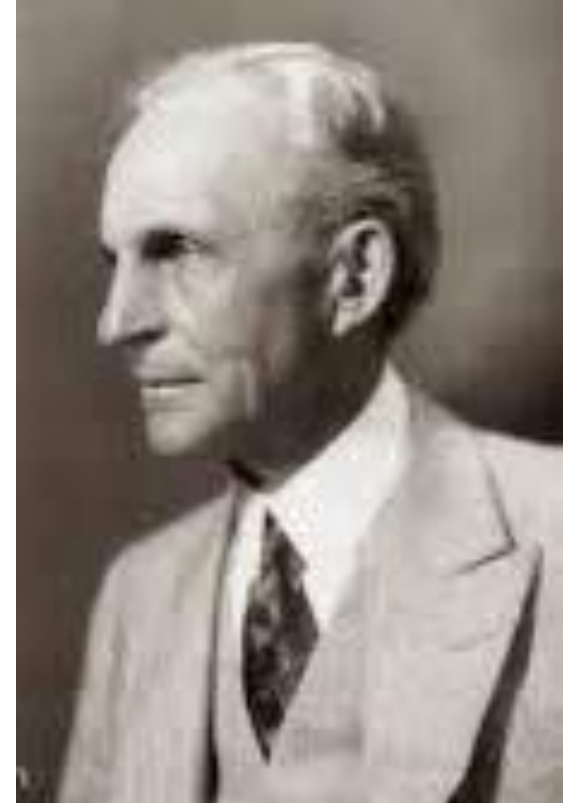


“How We Fast-Trackd a 90-Day Consolidation of Microbiology and Histology across Multiple Hospitals: What Worked Best in Pre-Planning, Staff Engagement, and Workflow Redesign”

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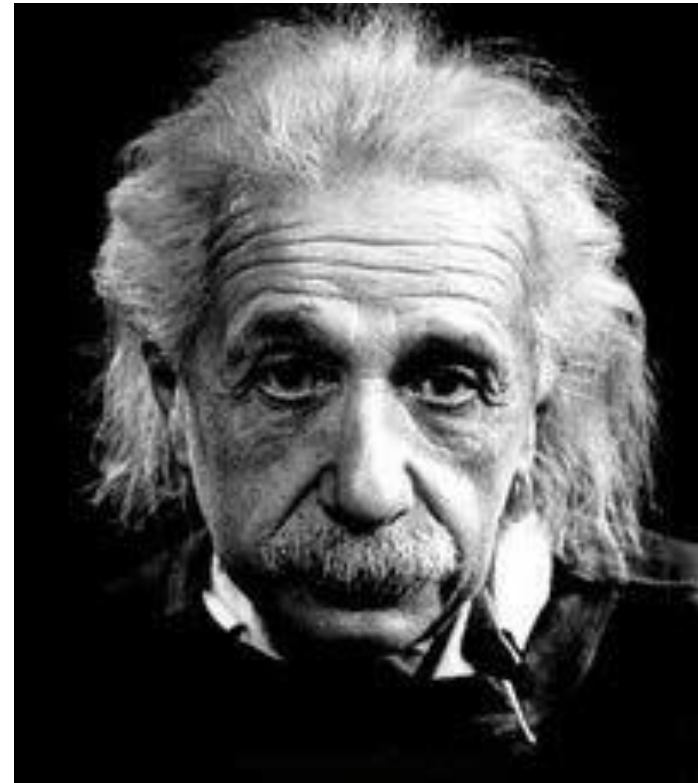
Thinking is the hardest work there is, which is the probable reason why so few engage in it.

- Henry Ford



“The world as we have created it is a process of our thinking. It cannot be changed without changing our thinking.”

— **Albert Einstein**



Objectives/Goals

- Complete two major consolidations by June 9, 2019 from Ocala to Tampa to coincide with the change in HIS/LIS to AdventHealth version of Cerner
- Microbiology Scope:
 - Move all culture-based testing from Ocala to Tampa
 - Retain all rapid testing at Ocala
 - Maintain or improve TAT for culture-based testing
- Pathology Scope:
 - Grossing stays with Ocala
 - Move tissue cassettes to Tampa for processing
 - Return slides promptly to Ocala for pathology review
 - Relocate cytology testing to Tampa area reference lab
 - Streamline send out testing

Initial Ocala Site Assessment – 01/19

Quality & Service Observations



Collection	Receiving	Processing	Testing	Resulting	Send Outs	Other
<ul style="list-style-type: none"> Recommend implementing process improvement for a.m. run collection, for either 1)SWARM or 2) increase nurse collections to optimize resources Develop process for eliminating duplicates before the morning run. Manual label printing negatively impacting efficiency and increases chance of patient ID errors 	<ul style="list-style-type: none"> Excellent standardization of receiving One pneumatic tube dedicated to ED recommended 	<ul style="list-style-type: none"> Recommend training CPTs on how to set up kit tests, micro plating, send-outs, pour-off urines, etc. Recommended to get 1 STAT centrifuge for a total of 2 STAT centrifuges 	<ul style="list-style-type: none"> Recommended training CPTs to load centrifuges, load UA instrument Optimize automated line by increase RPMs to match off-line centrifuges to reduce spin time 	<ul style="list-style-type: none"> Recommend implementing electronic pending log for received and unloaded specimens and assigning review for accountability 	<ul style="list-style-type: none"> CPT process sendouts as they arrive Re-direct reference testing to ARUP 	<ul style="list-style-type: none"> Recommended training for CPTs to plate micro specimens or consolidate to TAM Consolidate special chemistry/batch testing to TAM, to include Evolis and electrophoresis testing

Key Findings

Quality and Service

- Improve measurement system
- Nursing support AM run collections
- Duplicate orders / pre-printed labels
- Automated line performance
- Expand roles of phlebotomist

Productivity

- Low utilization: Phlebotomy staffing
- Low utilization: Core lab technical
- Benchmark: Micro and AP
 - Optimize or consolidate
- Consolidate batch testing

Future Diligence: Micro, AP, Org Structure

Management Structure:

- 1 director
- 3 managers
- 5 leads

AP Key Data

Path Assistant	1 (0)
Histo Tech	2
Histo Asst	1
Admin	0.2
Surgical Volume	7200
Non-Gyn	1060

27 = Histo cases per day

4 = Cyto Cases per day

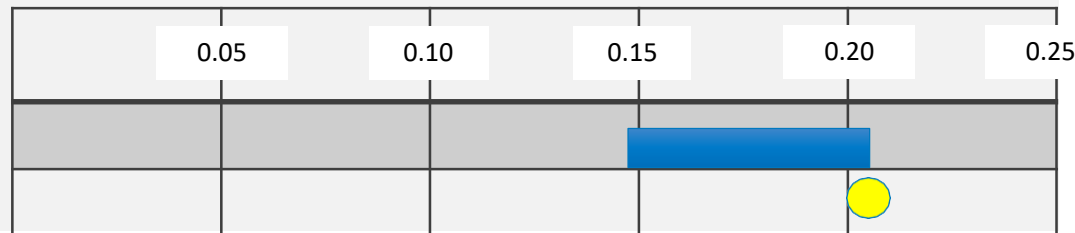
Micro Benchmark: Paid hours per case

Micro Key Data

FTE	4
Annualized Volume	38,628

Micro Benchmark

Micro Ocala

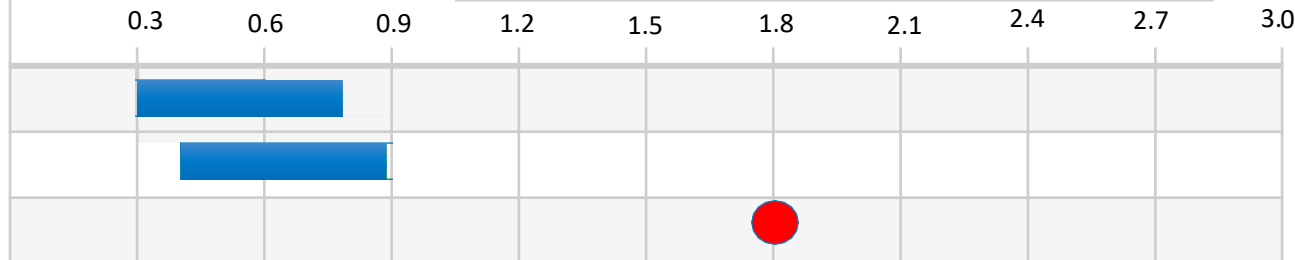


AP Benchmark: Paid hours per case

Cyto Benchmark

Histo Benchmark

Cyto / Histo - Ocala



Update: Ocala Executive Concerns

Challenges			
Delay in care due to distance	Financial Picture: would it be better to right size the departments	Timing with Tampa	Grow the Volume (Future State)
Opportunities			
2x courier runs/day	Reducing staff will still incur overhead for regulatory, QC/QA, equipment, maintenance, supplies, etc.	Tampa has enough time to add staffing as needed.	Keep a Histotech/lab aide for Pathology. Financials include additional .5 FTE.
24/7 coverage at TAM offsets transportation time	Coverage would be difficult, as both Micro and AP have specialized skills	No additional staff will be needed for Ocala Micro workload.	Courier costs: In Financials.
Subject Matter Experts available via phone call to TAM	Low volumes result in poor overall productivity. Micro has 7000 CPTs/FTE. A productive lab is 10-12,000 CPTs/FTE.	Tampa Pathology is understaffed and will be right-sized.	Tampa costs: In Financials.
Both AP and Micro cultures are processes that take multiple days. AP 1-2 days, Micro 2-5 days			

Why Consolidate?

- Prior laboratory management was ineffective
- A.M. run collections frequently not completed by 8 a.m.
- Many physician complaints to hospital COO
 - No confidence in the laboratory operations
- Many issues in core lab that required immediate attention, starting with phlebotomy
- AP and Micro are typically long processes that can easily be performed at a centralized location
- The move of these two major departments allowed focus on the core processes

Anatomic Pathology Consolidation

Consider Consolidation when

- Volume is less than 8000 cases/year
- Staffing and recruiting for histo/cytotechs is difficult
- Shared support is available from a sister facility within 2 hrs

Advantages

- Cost savings
- Maintain service levels
- Maintain TAT goals

Current Cases at Ocala
Histology – 27/day
Cytology – 4/day

Current Staffing in OcalaPathology		
Role	Benchmark	Actual
Tech, Grossing	0.38	0.0
Tech, Embedding	0.25	0.30
Tech, Microtomy	1.14	1.37
Tech, Special Stains	0.07	0.08
Tech, IHC	0.21	0.25
LabAid	0.48	1.00
Total Tech FTE	2.53	3.00
Medical Secretary	0.43	0.80
Leadership	0.48	1.00
Total Lab FTE	3.44	4.80

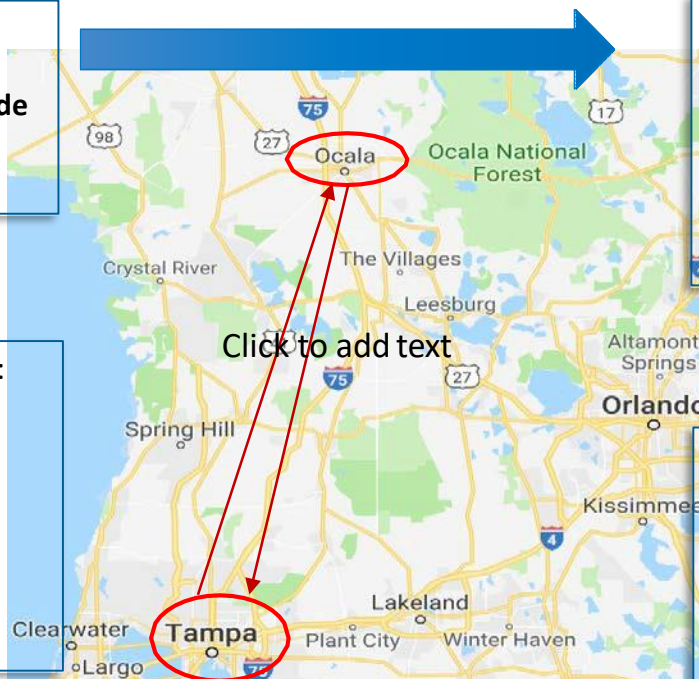
The Challenge

Consolidate Ocala's AP and Microbiology samples to Tampa by June 9, 2019 to coincide with HIS/LIS conversion (less than 3 months)



About the AdventHealth Tampa Lab:

- 25,500 AP cases/yr (108/day)
- 3 sites previously consolidated
- Paper (manual) processes throughout
- No barcoding on cassettes
- Handwriting slides
- Risk to add Ocala's volume



About the AdventHealth Ocala Lab

- 7,200 AP cases/yr (24/day)
- No barcoding on cassettes or slides
- Microbiology tests volume is 24,000 cultures/yr
- 3.8 FTEs in AP, 3.5 in micro
- 1.5 hrs drive to Tampa

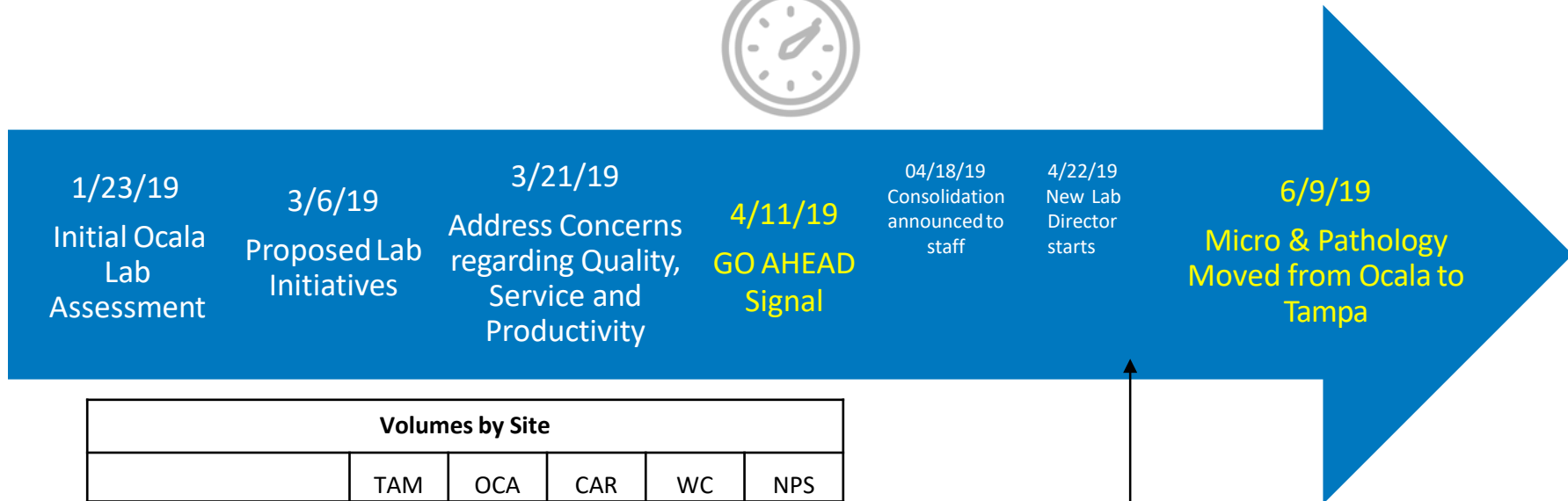
About the Consolidation:

- Move Micro/AP to Tampa, Cytology to reference lab
- Time to goal: 10 weeks
- Obstacle to overcome: Barcoding, with limited IT support onsite
- FTE savings 4.5

Ocala identity crisis:

- Known as Munroe Regional Medical Center
- Bought from CHS by Florida Hospital
- Name change to AdventHealth Ocala

The Timeline



Volumes by Site					
	TAM	OCA	CAR	WC	NPS
Microbiology Cultures/Year	25002	24601	8904	13144	6450
Pathology Cases/Year	10476	7255	6000	9114	2905

05/13
CTQ – no shiny objects!

The Team

Accumen Team:

- Mary Ann, Project Manager, Kelly, AP SME, Darren AP IT SME

Ocala Team:

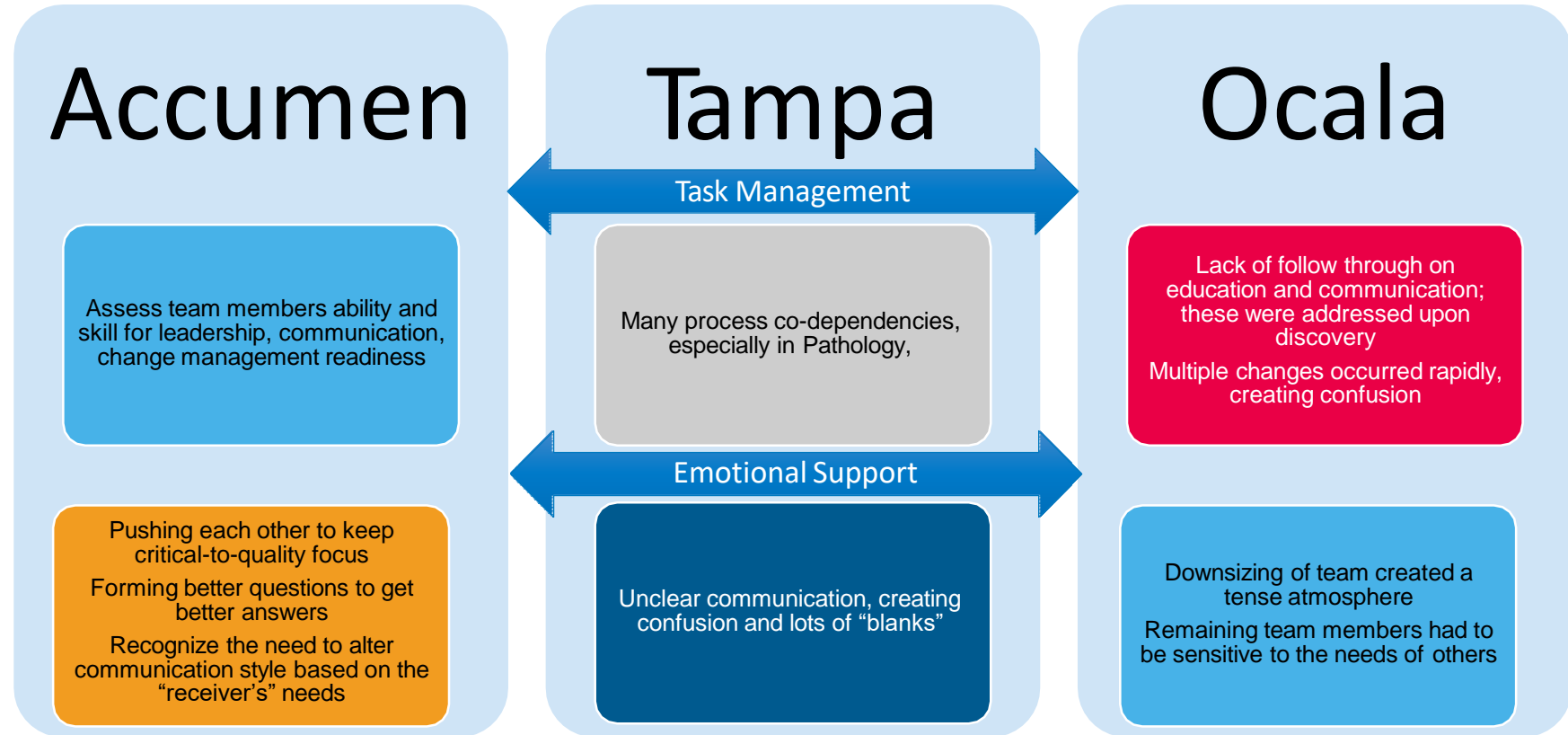
- Marian, Lab Director
- Micro: Isabel, Lab Supervisor; Beth, 2nd/3rd shift Lead; Pam, Micro SME
- Pathology: Linda, Pathology Lab Aide; Jeff, PA; Cheryl, Histotech

Tampa Team:

- Jose, Regional Lab Director
- Mike, Lab Director Tampa
- Micro: Leonor, Supervisor; Marilyn, Lead
- Pathology: Sheila, Supervisor; Morgan, Lead



People Challenges



Pathology

Part 1: Getting Tampa ready



Part 2: Moving Ocala operations

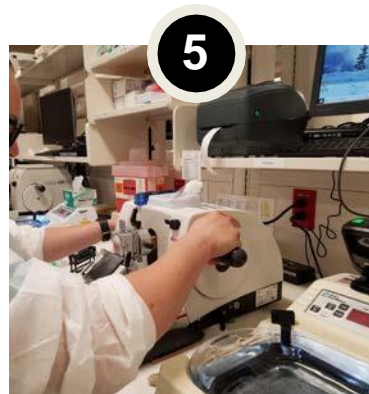


Tampa Process BEFORE Improvements



1. Left over specimens from previous day
2. Batch accessioning, with manual entry in cassette printer software
3. Transfer of tissues to PA's grossing cart
4. Cutsheet – manual form
5. Batch labeling before distribution, but only for Tampa cases. Other sites received hand-written slides.

Tampa Process AFTER Improvements



1. Single piece flow at accessioning
 - a. "Basketizing"
 - b. Auto print of cassettes with 2D barcodes
 - c. Use of cart system to level load work for PA's
- 2 – 5. Slide labeling program to print 2D barcoded slide labels based on defined protocols

PA Process Changes

- Assigning Pathologist in Cerner
 - Previously written on “cut sheet” and assigned by in-house transcriptionist
- Entering orders for stains and any billing corrections in Cerner
- Writing codes on sides of cassettes for any pre-ordered stains, such as H. pylori for some gastric specimens
- Plus: changed PA hours so very few left over specimens from previous day!



Tampa Operations Improvements

	Automation Score								
Pre-Consolidation	1	2	1	1	2	2	2	2	Avg 1.6
Action	Accessioning	Grossing, Cassetting	Embedding (identify pre-tests)	Microtomy	QA	Case Assembly	Special Stains	Add-ons, IHC	
Post Consolidation	4	4	3	5	4	4	3	2	Avg 3.6

Added barcoding,
Automated cassette
printing
[IT Engagement]

Removed "tags"
previously used; cut
sheets used only as
needed

Slides are easier to
QC with clearly
printed labels

Special stains for
panels are more
quickly identified

PA adds code to
cassette for
microtomy
[PA Engagement]

Added **SlidePrint^{DP}** software
for automated slide label
printing [Accumen
Engagement]

Cases are easily
matched with
printed blocks and
slides

1=low
5=high



IT Challenges: Software

- Cerner unable to provide:
 - Batch Transfer Lists for pathology
 - 2D barcode of cassettes
 - 2D barcode of slides
 - Comprehensive report at case distribution to ensure all slides were accounted for when sending out
 - Add-on orders process was messy
- Concerns that any outside software would create risk to HIS/LIS
 - Mitigated by utilizing stand-alone PCs for slide labeling program developed by Accumen AP IT SME
- Several iterations of Slide Label Printer program implemented
 - Added/subtracted protocols
 - Developed manual process with barcode scanning for pre-ordered slides, such as H. Pylori as indicated by the PA

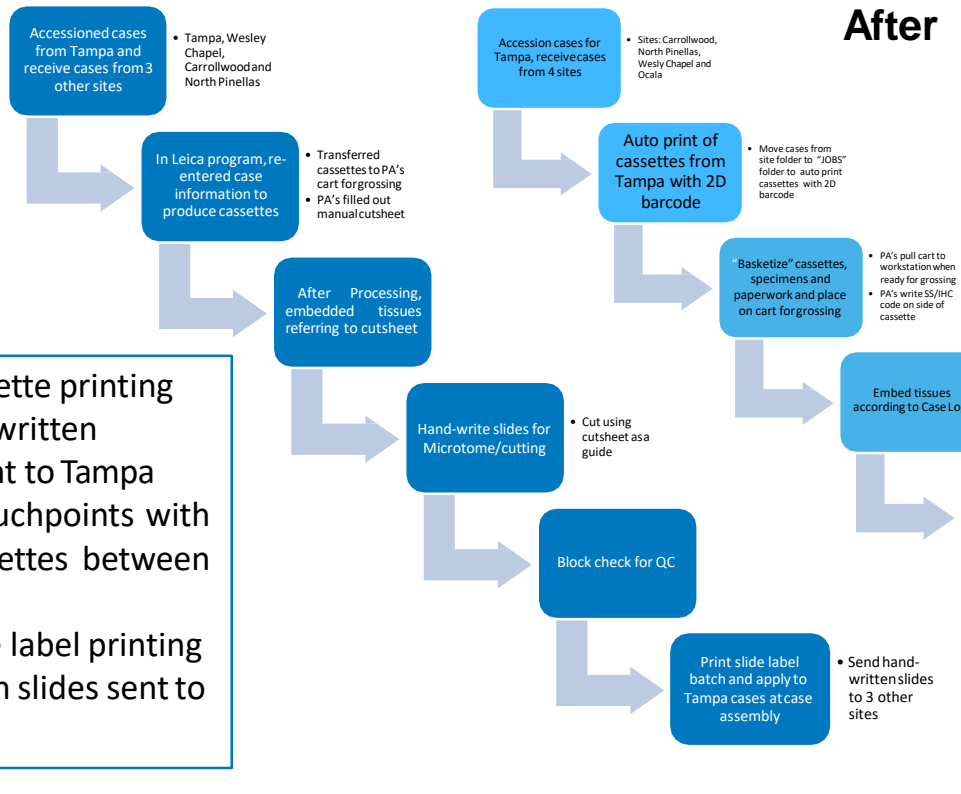
IT Challenges: Hardware

- Cassette printers had to be configured to include:
 - Case #, patient ID
 - 2 different brands of cassette printers
- Slide label printers- the wrong one was ordered and we had to scramble before go-live!
 - Converted to xylene resistant labels ahead of time
- Hardware required:
 - Full PC setup (PC, monitor, keyboard, mouse) at Microtome stations
 - Reconfigure shelving and desktop in Pathology to accommodate the PCs
 - Added lab label printer to each microtome station
 - Added PC's to the grossing stations for the PA's

Tampa Pathology: Comparison of Before/After

Before

- Manual cassette printing
- Some hand-written cassettes sent to Tampa
- Excessive touchpoints with moving cassettes between carts
- Manual slide label printing
- Hand-written slides sent to sites



Tampa Pathology Staffing

- Evaluated staffing levels and hours of work
- Added 1.0 FTE to accommodate the new volume
- Altered staff schedule to meet the demands of the incoming work and outbound courier schedule
- Adjusted processing runs based on demands

Role	Standard State		Productive State	
	Item/hr	Shift (6hrs)	item/hr	Shift (6hrs)
Grossing (cases)	12	72	15	90
Embedding (block)	50	300	60	360
Microtomy (slides)*	20	120	30	180
Specials (slides, m)	10	60	12	90
IHC/ISH (slides, auto)	10	60	13	78

Productive State
> 50,000 cases/year



Consolidation is Coordination

Define expectations for services

- Will Pathology group continue to read the cases at Ocala? (Prof Comp)
 - Define goals for initial case reading and add-on testing (IHC, specials)
 - Understand technical differences in slides, e.g., H&E staining
- Create **courier** routes to meet goals
 - Routes should meet needs of Ocala and Tampa for handling samples
 - May be used for transporting other samples (clinical, supplies, micro, etc)

Understand, meet needs for hospital services

- Define billing practices for TC and PC components
- How will bone marrow and FNAs be collected if techs currently assist?
- How will non-scheduled frozen sections be managed?
- Build batching and sample transfer mechanisms into LIS for tracking

Review current processes with other WFD sites and adopt as needed

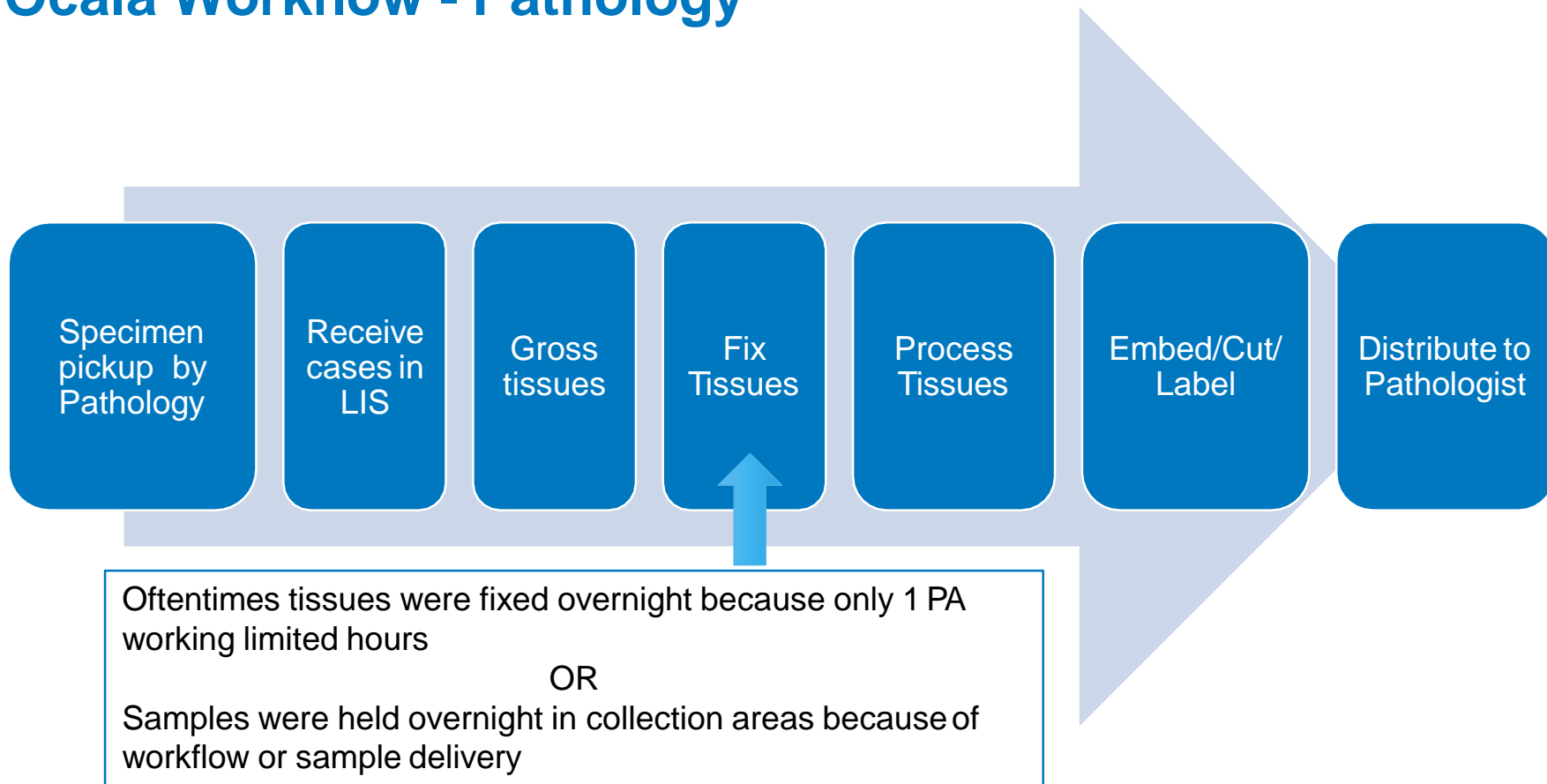
- Cytology
- Delivery of specimens from Surgery/Endo

Ocala Pathology Cost/Benefit

Annualized Savings	AHOC
Test Volume to be Sent to AHT	8306
Pathology Labor Reduction Savings	\$ 299,681
Pathology Supply Costs Savings	\$ 196,947
Estimated Total Savings - by Site	\$ 496,628
Additional Expenses	AHOC
Purchased Services Allocation	\$ 242,433
Courier Costs	
Note: Include in Micro Cost/Benefit Analysis	
Estimated Total Costs	\$ 242,433
Net Savings By Site	\$ 254,194

Supplies	Annual Spend
Stains & Fixatives	\$1,325.00
Ventana supplies	\$86,424.00
Service Contract	
Tissue Processors	\$26,937.00
Tissue cover slips	\$21,000.00
Sakura Service	\$10,950.00
Leica Service	\$4,400.00
Tissue Fixatives	\$1,168.00
Cyto Solutions	\$39,254.00
Gemini Service	\$5,489.00

Ocala Workflow - Pathology



Ocala Pathology Communication Plan

- COO met with Pathologists to explain the what and when
- COO and Regional Lab Director met with Lab Staff to explain the what and when
 - Individual staff meetings thereafter with all staff impacted by the changes
- On site meetings pre-go live to work on processes
- Jointly developed process flow maps to outline the new processes and work through any issues
- Weekly or bi-weekly meetings with Pathology staff
- Many on-site visits to clarify processes both before/after changes
- Daily calls for the first 3 weeks, 2x/week for the next few weeks, then operations team took over with periodic calls

Ocala TAT Pre/Post Consolidation

Pathology Consolidation		
	Pre	Post
Date Range	Apr-19	6/23 - 7/24/19
Number	999	716
Order/Completed Mean	20:33	40:56
Order/Completed Median	17:11	40:46

- Pre-data included specimens that were collected after 2:30 p.m. but not accessioned until the next day.
 - Lab was responsible for picking up specimens from surgery several times throughout the day.
- Post-data included specimens that were collected up to 4 p.m. for the 4:30 p.m. courier pickup.
- Added mid-day courier run to expedite slides to pathologists at Ocala, to offset longer processing times for thickly grossed tissues.

The Outcome: Completed in less than 7 weeks!

Ocala Operations:

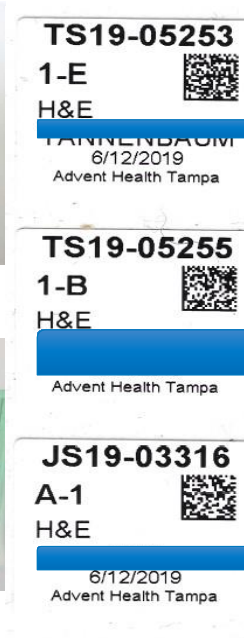
- Accession, gross, and prepare samples in barcoded cassettes
- Transport cassettes to Tampa
- Receive completed slides from Tampa, assign to pathologists
- Standardized protocols for Micro and Pathology

Tampa Operations:

- Receive barcoded cassettes from Ocala
- Process samples and produce H&E
- Transfer completed slides to Ocala
- Receive, perform add-ons as needed
- Divert cytology samples to reference lab
- TAT Goal: Next day's morning courier, 90%

Future opportunities:

- Electronic orders for add-ons by pathologists – requires LIS support
- Enhancements to SlidePrint^{DW} software to include tissue type
- Electronic tracking of specimens and slides between sites



Current AP TAT : 90%! Next day's morning courier!

Microbiology



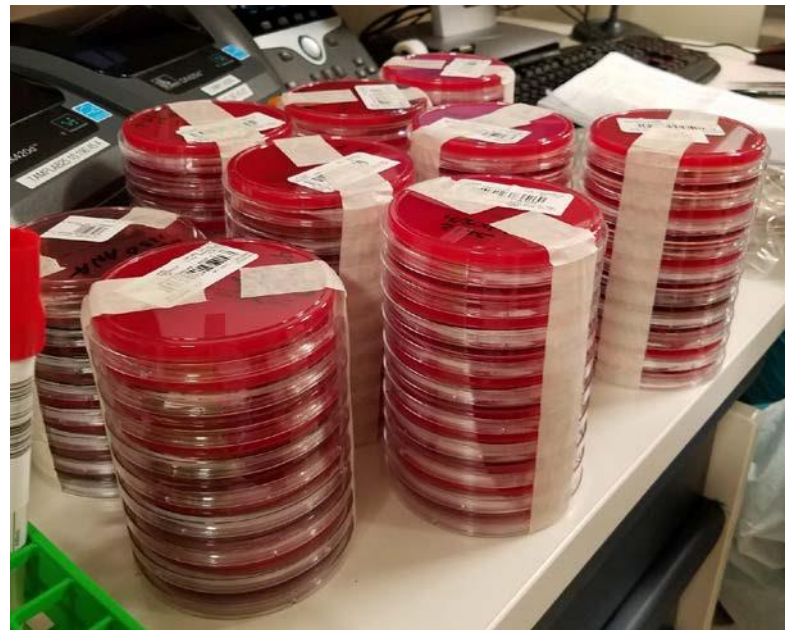
Tampa Workflow - Microbiology

Tampa serves as the reference lab for cultures for:

- Tampa, Carrollwood, Wesley Chapel, North Pinellas
 - Added Ocala post consolidation
- Tampa performs reflex testing for all sites as needed

Transport batches standardized prior to consolidation

- Single piece flow or small batches of “like” sources, such as urines
- Use of masking tape to keep plates together
 - Cellophane was difficult to remove



Ocala Workflow - Microbiology

PRE Consolidation:

- 3.5 FTEs dedicated to 1x/day reading of cultures and rapid testing during day shift only
- Core lab staff covered all rapid testing on other shifts
- Most staff were trained to perform gram stains
- AFB/Mycology sent to a reference lab

POST Consolidation:

- Core Lab staff performed all rapid testing and plate streaking 24/7
- All staff were trained to perform gram stains
 - Ocala obtained an automatic gram stain instrument
- All cultures, AFB/Mycology sent to Tampa
- All reflex testing from rapid testing sent to Tampa
- Tampa Microbiology SME spoke to ID doctors at ADH Ocala

Ocala Micro Cost/Benefit

Savings	AHOC
Test Volume to be Sent to AHT	24601
Micro Labor Reduction Savings	\$ 231,431
Microbiology Supply Costs Savings	\$ 114,518.50
Estimated Total Savings - by Site	\$ 345,950

Additional Expenses	AHOC
Purchased Services Allocation	\$ 165,191
*Courier Costs:	\$ 62,050
Estimated Total Costs	\$ 227,241
Net Savings By Site	\$ 118,709

Supplies	Annual Spend
Microscan supplies	\$ 37,185.00
Microscan Service	\$ 19,500.00
Broth, Agar, Gram Stains, etc	\$ 58,234.00
Agar, Innoculation loops	\$ 3,511.00
Proficiency	\$ 2,156.00
QC	\$ 2,620.00
Micro Hood Maintenance	\$ 3,613.00

Standard Work: Inoculation of Plates/Source

CULTURE	BAP	CHOC	MAC	CDG	KV BBE	MTM	PEA	THIO	BHI	SAB	ANA POUCH	CANDIDA CHROM	GRAM STAIN	INC. TEMP
ACINETOBACTER	X		X											NON CO2
ANAEROBE				X	X			X			X			CO2
ACID FAST BACILLI (1)	SEND	TO	TAMPA	FOR	SETUP									
BLOOD - AEROBIC (BLUE) (2)	X	X	X											CO2
BLOOD - ANAEROBIC (PURPLE) (3)	X	X	X	X									X	CO2
BLOOD - PEDIATRIC (YELLOW) (4)	X	X	X	X									X	CO2
BODY FLUID (5)	X	X	X											CO2
CATH TIP	X													CO2
CSF (6)	X	X												CO2
EAR	X	X	X											CO2
EYEC	X	X	X							X		X		CO2
FUNGUS										X		X		
GENITAL GC	SEND	CULTURE	TO	TAMPA	FOR									
GROUP B STREP	SEND	CULTURE	AND	PCR				SETUP						
MRSA CULTURE	SEND	SPECIMEN	TO	FOR				PCR	IS	DONE	IN	HOUSE		
SINUS, NASOPHARYNX	X	X	X											CO2
SPUTUM (7)	X	X											X	CO2
BRONCH WASH (8)	X	X											X	CO2
STOOL (9)	SEND			TAMPA	FOR	SETUP								
THROAT GROUP A STREP REFLEX (10)														NON CO2
THROAT CULTURE (11)	X	X												CO2
TISSUE / BONE (12)	X	X	X						X				X	CO2
URINE (13)	X		X											NON CO2
PROSTHETIC DEVICE (14)	X							X						CO2
WOUND (15)	X	X	X				X							CO2
MOCARDIA (16)	SEND	SPECIMEN	TO	TAMPA	FOR	SETUP								

Plate protocols were standardized prior to the consolidation!

Standard Work: Batches for Transfer



Instructions:

- After streaking plates per protocol, prepare a Transfer Batch in Cerner and print.
- Tape plates together (separate aerobic from anaerobic as required).
- Place plates and Transfer Batch List in a small clear plastic bag (biohazard bag can be used).
- Do not seal bag; place in incubator in designated area for courier pickup.
- Prior to courier arrival
 - 8:30 a.m. Monday-Friday
 - 4:30 p.m. Monday-Friday
 - 10 a.m. Saturday/Sunday
- Seal individual bags and place in large overwrap bag for transport
- When courier arrives place bags in bin for transport!

Ocala Microbiology Communication Plan

What Stays in Ocala

Tests
Negative Blood Cultures
All Rapid Micro Testing that is performed on the Cepheid
RSV and Kit Testing
Gram Stains for cultures
Cepheid, CTNG, FLU, C.DIFF, MTB, Strep Pneumo, Strep Legionella Ag, Amnisure, FFN
Discontinue Fungal Smears only test
Switch from slants to plates
Body Fluids in Blood Culture bottles, keep 14 days

What Goes to Tampa

Tests
Positive Blood Cultures
All Stool samples will be sent to TAM; include: EO157, Campy, Giardia, O&P AFB, Stools, Cultures, Campy, EC157, Giardia, Crypto, O&P
CSF: gram stain + plates.
Cultures
Fungals to TAM: plate and send



Methods of communication:

- Posters
- Book of Knowledge for Micro
- Team Meetings for all shifts, repeated
- Memo's on Micro bulletin boards

Ocala Micro Culture TAT Pre/Post Consolidation

Pre Consolidation	Ord/Drawn	Drawn/InLab	InLab/Complete	Order/Complete
All Cultures				
Mean		7:44:56	98:47:39	105:05:56
Median	0:19:46	1:48:00	53:08:24	62:18:14
Number	2244			
Date Range	01/01/19 - 01/31/19			
Urine Cultures				
Mean		15:54:35	35:25:35	40:26:45
Median	0:09:39	1:28:00	33:25:48	39:08:13
Number	723			
Post Consolidation	Ord/Drawn	Drawn/InLab	InLab/Complete	Order/Complete
All Cultures				
Mean	2:20:47	10:03:28	96:23:39	108:43:50
Median	0:35:54	5:01:00	120:06:11	122:13:08
Number	1605			
Date Range	6/11/19 - 6/30/19			
Urine Cultures				
Mean	1:04:41	19:33:06	20:34:30	41:12:16
Median	0:14:16	17:31:30	17:43:16	38:10:48
Number	358			

Note: Excludes blood cultures, AFB and rapid testing

Conclusion: slight improvement in TAT overall, significant improvement in UA TAT

The Pluses

Pushed hard to meet deadlines

- This sometime's created friction and frustration
- Generally resolved through communication and patience

Accumen: Influencers, but didn't have any authority

- Many Co-dependencies
- Lots of communication!!
- Brought Tampa SMEs to Ocala for face-to-face interactions

Barrier busters

- IT was a challenge; we had to regroup and restate the objective several times

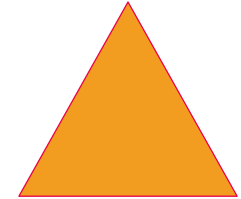
Flexed solutions

- PA's writing codes on side of block for HTs to communicate microtome needs for upfront orders (such as H. pylori stains)
- One site sending hand-written cassettes => printed 2D barcode cassettes and transferred tissues at embedding using single-piece flow



Lessons Learned

- **Engage all of the IT people** and outline the why and when very early in the process; don't forget LIS, local IT, vendors, etc.
- Develop training checklist, training guide and validation documents ahead of time
- Develop communication plan regarding the changes and schedule deployment to make sure all are aligned; ***don't count on local leadership to manage this process independently!***
 - Schedule pre/post consolidation meetings to keep everyone on track
 - Don't forget outside accounts, Cytology, surgery staff, etc.
- Don't forget the PA's and pathologists in all of the communication, even if they are contracted staff
- If you use a reference lab and pass work from one lab to another, make sure you set up an account beforehand; this occurred with Cytology
- Determine timeframe to "operationalize" the project ahead of time
 - Local team takes over operational meetings for sustaining changes



Outcome

Success! Go Live occurred 6/9/19 for both Microbiology and Pathology

What went well:

- Microbiology went very smoothly, with few issues
- Pathology slide quality was excellent
- Tampa Pathology adopted new processes for cassette printing and slide label printing
- Great communication pre/post go live
- Lab teams were very engaged with new processes

What could have gone better:

- Issues with Ocala's legacy LIS system and access was a huge distraction and caused delays
- AIT/LIS team would not engage with a solution for creating a pending log for add-on orders; this caused a reversion to manual methods (a big disappointment)
- Damage control for Ocala pathologist necessary
- Cytology process could have been smoother



“Whether you
think you can
or think you can’t
you’re right”

Henry Ford





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