

# LifeBridge Organ and Tissue Sharing Case Study

nonprofit

2019

# Baldrige Performance Excellence Program

National Institute of Standards and Technology (NIST) • United States Department of Commerce



July 2019

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## Baldrige Performance Excellence Program

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The Baldrige Program welcomes your comments on the case study and other Baldrige products and services. Please direct your comments to the address above.

The Baldrige Program is very grateful to an actual organ procurement organization that allowed its own Baldrige-based award application to be the basis for this case study. From that real application, names and data have been fictionalized, and elements have been intentionally edited to be less mature, less beneficial, and missing in order for this case study to score lower than the real application. Such editing was done so that Baldrige examiners being trained using the case study can more easily identify opportunities for improvement and general feedback.

The LifeBridge Organ and Tissue Sharing Case Study is a fictitious Baldrige Award application prepared for use in the 2019 Malcolm Baldrige National Quality Award Examiner Preparation Course. The fictitious case study organization is intended to be a regional organ and tissue procurement organization for people living in a federally assigned territory within the made-up states of North and South Takoma. The case study illustrates the format and general content of an award application. However, since the case study serves primarily as a tool for training examiners to evaluate organizations against the 2019–2020 Baldrige Excellence Framework and its Criteria for Performance Excellence, it may not address all Criteria requirements or demonstrate role-model responses in all Criteria areas. Please refer to the LifeBridge Organ and Tissue Sharing Feedback Report to learn how the organization scored and to see its strengths and opportunities for improvement.

This case study is a work of fiction, created and produced for the sole purpose of training regarding the use of the Baldrige Excellence Framework. There is no connection between the fictitious LifeBridge Organ and Tissue Sharing and any other organization, named either LifeBridge Organ and Tissue Sharing or otherwise. The names of several national and government organizations are included to promote the realism of the case study as a training tool, but any data and content about them may have been fictionalized, as appropriate; all other organizations cited in the case study are fictitious or have been fictionalized.

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2019 ELIGIBILITY  
CERTIFICATION  
FORM

## 1. Your Organization

Official name	LifeBridge Organ and Tissue Sharing
Other name	
Prior name	<i>(if changed within the past 5 years)</i>

Headquarters address	444000 Georgie Blvd. Suite 100 Columbia, NT 01011
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## 2. Highest-Ranking Official

Mr.  Mrs.  Ms.  Dr.

Name	Marie
Job title	Jamerson
Email	Chief Executive Officer
Telephone	123-555-0001
Fax	252-555-1000

Address	<input checked="" type="checkbox"/> Same as above
---------	---

## 3. Eligibility Contact Point

*Designate a person who can answer inquiries about your organization. Questions from your organization and requests from the Baldrige Program will be limited to this person and the alternate identified below.*

Mr.  Mrs.  Ms.  Dr.

Name	Bart Wilson
Job title	Director, Quality
Email	bart.wilson@LOTS.opo
Telephone (office and cell, if possible)	252-555-0072 (office); 123-555-2715 (cell)
Fax	123-555-1000

Address	<input checked="" type="checkbox"/> Same as above
Overnight mailing address	<input checked="" type="checkbox"/> Same as above <i>(Do not use a P.O. box number.)</i>

## 4. Alternate Eligibility Contact Point

Mr.  Mrs.  Ms.  Dr.

Name	Lisa Renaldo
Email	lisa.renaldo@LOTS.opo

Telephone	123-555-0007
Fax	123-555-1000

Eligibility package due February 13, 2019

Award package due April 23, 2019

## 5. Application History

a. Has your organization previously submitted an eligibility certification package?

Yes. *Indicate the year(s). Also indicate the organization's name at that time, if different.*

Year(s)

2018

Name(s)

No

Don't know

b. Has your organization ever received the Malcolm Baldrige National Quality Award®?

Yes.

Did your organization receive the award in 2013 (the year you submitted award-winning application) or earlier?

Yes. *Your organization is eligible to apply for the award.*

No. *If your organization received an award between 2014 and 2018, it is eligible to apply for feedback only. Contact the Baldrige Program at (877) 237-9064, option 3, if you have questions.*

No

c. Has your organization participated in a regional/state/local or sector-specific Baldrige-based award process?

Yes. Years:

State Quality Award, 2015, 2016,  
2017

No

d. Is your organization submitting additional materials (i.e., a completed Organizational Profile and two results measures for each of the five Criteria results items [option 8 in section 6k]) as a means of establishing eligibility?

No. *Proceed to question 6.*

Yes. *In the box below, briefly explain the reason your organization chose this eligibility option. (This information will be shared with the Alliance leadership, without revealing your organization's identity.)*

## 6. Eligibility Determination

See also [Is Your Organization Eligible?](https://www.nist.gov/baldrige/baldrige-award/your-organization-eligible/) (<https://www.nist.gov/baldrige/baldrige-award/your-organization-eligible/>).

a. Is your organization a distinct organization or business unit headquartered in the United States?

Yes  No. *Briefly explain.*

- b. Has your organization officially or legally existed for at least one year, or since April 1, 2018?  
 Yes  No
- c. Can your organization respond to all seven Baldrige Criteria categories? Specifically, does your organization have processes and related results for its unique operations, products, and/or services? For example, does it have an independent leadership system to set and deploy its vision, values, strategy, and action plans? Does it have approaches for engaging customers and the workforce, as well as for tracking and using data on the effectiveness of these approaches?  
 Yes  No
- d. If some of your organization's activities are performed outside the United States or its territories and your organization receives a site visit, will you make available sufficient personnel, documentation, and facilities in the United States or its territories to allow a full examination of your worldwide organization?  
 Yes  No  Not applicable
- e. If your organization receives an award, can it make sufficient personnel and documentation available to share its practices at the Quest for Excellence® Conference and at your organization's U.S. facilities?  
 Yes  No

If you checked "No" for 6a, 6b, 6c, 6d, or 6e, call the Baldrige Program at (877) 237-9064, option 3.

### Questions for Subunits Only

- f. If your organization is a subunit in education or health care, does your subunit provide direct teaching and instructional service to students or direct health care services to people?  
 Yes.  
(<https://www.nist.gov/baldrige/baldrige-award/your-organization-eligible>). **Then proceed to item 6k.**  
 No. *Continue with 6g.*
- g. Does your subunit function independently and as a discrete entity, with substantial authority to make key administrative and operational decisions? (It may receive policy direction and oversight from the parent organization.)  
 Yes. *Continue with 6h.*  
 No. *Your subunit probably is not eligible to apply for the award. Call the Baldrige Program at (877) 237-9064, option 3.*
- h. Does your subunit have a clear definition of "organization" reflected in its literature? Does it function as a business or operational entity, not as activities assembled to write an award application?  
 Yes. *Continue with 6i.*  
 No. *Your subunit probably is not eligible to apply for the award. Call the Baldrige Program at (877) 237-9064, option 3.*
- i. Is your subunit in manufacturing or service?

Yes. Does it have 500 or fewer employees? Is it separately incorporated and distinct from the parent organization's other subunits? Or was it independent before being acquired by the parent, and does it continue to operate independently under its own identity?

Yes. Your subunit is eligible in the small business category. Attach relevant portions of a supporting official document (e.g., articles of incorporation) to this form. **Proceed to item 6k.**

No. Continue with 6j.

j. Is your subunit self-sufficient enough to be examined in all seven categories of the Criteria?

- Does it have its own senior leaders?
- Does it plan and implement its own strategy?
- Does it serve identifiable customers either inside or outside the organization?
- Is it responsible for measuring its performance and managing knowledge and information?
- Does it manage its own workforce?
- Does it manage its own work processes and other aspects of its operations?
- Can it report results related to these areas?

Yes. Proceed to 6k (table below).

No. Your organization probably is not eligible to apply for the award. Call the Baldrige Program at (877) 237-9064, option 3.

**k. Does your organization meet one of the following conditions?**

1. My organization has won the Baldrige Award (prior to 2014).	<input type="checkbox"/> Yes	Your organization is eligible.	No	Continue with statement 2.
2. Between 2014 and 2018, my organization applied for the national Baldrige Award, and the total of the process and results band numbers assigned in the feedback report was 8 or higher.	<input type="checkbox"/> Yes	Your organization is eligible.  Year:  Total of band scores:	No	Continue with statement 3.
3. Between 2014 and 2018, my organization applied for the national Baldrige Award and received a site visit.	<input type="checkbox"/> Yes	Your organization is eligible.  Year of site visit:	No	Continue with statement 4.
4. Between 2014 and 2018, my organization received the top award from an award program that is a member of the Alliance for Performance Excellence.	X Yes	Your organization is eligible.  Award program:  Year of top award:	No	Continue with statement 5.



5. More than 25% of my organization's workforce is located outside the organization's home state.	<input type="checkbox"/> Yes	Your organization is eligible.	No	Continue with statement 6.
6. There is no Alliance for Performance Excellence award program available for my organization.	<input type="checkbox"/> Yes	Your organization is eligible.	No	Continue with statement 7.
7. Between 2015 and 2018, my organization applied for the national Baldrige Award through the alternate method (option 8 below) and the total of the process and results bands assigned in the feedback report was 6 or higher.	<input checked="" type="checkbox"/> Yes	Your organization is eligible.  Year:	No, my organization did not apply using this method.  <input type="checkbox"/> My organization applied using this method, but did NOT receive a total of 6 or higher.	Continue with statement 8. Your organization is not eligible. Call 877-237-9064, option 3, if you have questions.
8. My organization will submit additional eligibility screening materials (i.e., a complete Organizational Profile and two results measures for each of the five Criteria results items). The Baldrige Program will use the materials to determine if my organization is eligible to apply for the award this year (as described in the <a href="#">Eligibility FAQs</a> ).	<input type="checkbox"/> Yes	The Baldrige Program will review the materials and contact your ECP after determining your eligibility.	No	Call 877-237-9064, option 3, if you have questions.

## 7. Award Category

a. Award category (*Check one.*)

*Your education or health care organization may use the Business/Nonprofit Criteria and apply in the service, small business, or nonprofit category. However, you probably will find the sector-specific (Education or Health Care) Criteria more appropriate.*

### For-Profit

- Manufacturing
- Service
- Small business (≤ 500 employees)
- Education

### Nonprofit

- Nonprofit
- Education
- Health care

Eligibility package due February 13, 2019

Award package due April 23, 2019

Health care

b. Industrial classifications. In table below, list up to three of the most descriptive NAICS codes for your organization (see NAICS list included at the end of this document). *These are used to identify your organizational functions and to assign applications to examiners.*

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## 8. Organizational Structure

a. For the preceding fiscal year, the organization had \_\_\_\_\_ in ↓

- up to \$1 million  
  \$1.1 million–\$10 million  
 \$10.1 million–\$100 million  
  \$100.1 million –\$500 million  
 \$500.1 million–\$1 billion  
  more than \$1 billion

<input type="checkbox"/> sales
<input type="checkbox"/> revenue
<input checked="" type="checkbox"/> budget

b. Attach a line-and-box organization chart that includes divisions or unit levels. In each box, include the name of the unit or division and the name of its leader. Do not use shading or color in the boxes.

The chart is attached.

c. The organization is \_\_\_\_\_ a larger parent or system. *(Check all that apply.)*

- not a subunit of *(See item 6 above.)*  
  a subsidiary of  
  controlled by  
  administered by  
 owned by  
  a division of  
  a unit of  
  a school of  
  other \_\_\_\_\_

Parent organization		Address	
Total number of paid employees*		Job title	
Highest-ranking official			
Telephone			

*\*Paid employees include permanent, part-time, temporary, and telecommuting employees, as well as contract employees **supervised by the organization.** Include employees of subunits but not of joint ventures.*

Attach a line-and-box organization chart(s) showing your organization’s relationship to the parent’s highest management level, including all intervening levels. In each box, include the name of the unit or division and its leader. Do not use shading or color in the boxes.

The chart is attached.

d. Considering the organization chart, briefly describe below how your organization relates to the parent and its other subunits in terms of products, services, and management structure.

--

e. Provide the title and date of an official document (e.g., an annual report, organizational literature, a press release) that clearly defines your organization as a discrete entity.

Title <input style="width: 95%;" type="text"/>	Date <input style="width: 95%;" type="text"/>
<p>Attach a copy of relevant portions of the document. If you name a website as documentation, print and attach the relevant pages, providing the name only (not the URL) of the website.</p> <p><input type="checkbox"/> Relevant portions of the document are attached.</p> <p>f. Briefly describe the major functions your parent or its other subunits provide to your organization, if appropriate. <i>Examples are strategic planning, business acquisition, research and development, facilities management, data gathering and analysis, human resource services, legal services, finance or accounting, sales/marketing, supply chain management, global expansion, information and knowledge management, education/training programs, information systems and technology services, curriculum and instruction, and academic program coordination/development.</i></p> <div style="border: 1px solid black; height: 60px; margin-top: 10px;"></div>	

## 9. Site Listing

You may attach or continue your site listing on a separate page as long as you include all the information requested here. You may group sites by function or location (city, state), as appropriate. Please include the total for **each column** (sites, employees/faculty/staff, volunteers, and products/services). If different sites are located on the same campus (e.g., medical building and acute care hospital), please indicate that in the “Sites” column. See the ABC HealthCare example below. If your organization has any joint ventures, please list and describe those in the second table below.

*Please include a detailed listing showing all your sites. If your organization receives a site visit, an examiner team will use this information for planning and conducting its visit. Although site visits are not conducted at facilities outside the United States or its territories, these facilities may be contacted by teleconference or videoconference.*

Example (ABC HealthCare)					
<b>Sites (U.S. and Foreign)</b> <i>List the city and the state or country.</i>	<b>Workforce*</b> <i>List the numbers at each site.</i>		<i>List the % at each site, or use “N/A” (not applicable).</i>	<b>Relevant Products, Services, and/or Technologies</b>	
	<i>Check one or more.</i> <input checked="" type="checkbox"/> <b>Employees</b> <input type="checkbox"/> <b>Faculty</b> <input type="checkbox"/> <b>Staff</b>	<b>Volunteers</b> (no. or N/A)	<i>Check one. % of</i> <input type="checkbox"/> <b>Sales</b> <input checked="" type="checkbox"/> <b>Revenue</b> <input type="checkbox"/> <b>Budget</b>		
ABC Medical Center, Anytown, NY	1,232	147	77%	Admin. offices, inpatient care, ED, imaging services, lab	
ABC Hospital West, West Anytown, NY	255	78	14%	Inpatient services, ED, lab	
ABC Medical Group, Anytown, NY <i>Located on same campus as ABC Medical Center</i>	236	N/A	6%	Primary & specialty physician care	
ABC Imaging Center, West Anytown, NY	11	N/A	1%	Imaging services	
ABC Hospice Services, West Anytown, NY <i>Different location than ABC Hospital West and ABC Imaging Center</i>	94	89	1%	On- and off-site hospice services	

# 2019 Eligibility Certification Form

Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 06/30/2019

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	ABC Urgent Care, West Anytown, NY	8	N/A	1%	Outpatient emergency and urgent care services
<b>Total</b>	<b>6</b>	<b>1,836</b>	<b>314</b>	<b>100%</b>	

Your Organization				
Sites (U.S. and Foreign) <i>List the city and the state or country.</i>	Workforce* <i>List the numbers at each site.</i>		<i>List the % at each site, or use "N/A" (not applicable).</i>	Relevant Products, Services, and/or Technologies
	<i>Check one or more.</i> <input checked="" type="checkbox"/> Employees <input type="checkbox"/> Faculty <input type="checkbox"/> Staff	Volunteers (no. or N/A)		
Columbia, NT	150		100%	Regional organ and tissue procurement
<b>Total</b>	150	N/A	100%	

\*The term workforce refers to all people actively involved in accomplishing the work of an organization. The workforce includes paid employees (e.g., permanent, part-time, temporary, telecommuting, and contract employees supervised by the organization) and volunteers, as appropriate; it also includes team leaders, supervisors, and managers at all levels.

Joint Ventures			
Partner Organization	# of applicant employees included in joint venture	% Owned by the Applicant	Describe extent/level of operational and managerial responsibility your organization has for the joint venture.
<b>Total</b>			

## 10. Key Business/Organization Factors

Eligibility package due February 13, 2019

Award package due April 23, 2019

List or briefly describe where necessary the following key business/organization factors (we recommend using bullets). Please be concise, but be as specific as possible. Provide full names of organizations (i.e., do not use acronyms). *The Baldrige Program uses this information to avoid conflicts of interest when assigning examiners to your application. Examiners also use this information in their evaluations.*

- a. Main products and/or services and major markets served (local, regional, national, and international)

LOTS has served as the regional organ and tissue procurement organization (OPO) for 3.2 million people living within a federally assigned territory inclusive of 62 counties located within the states of North Takoma (NT) and South Takoma (ST). From its founding goal to assist in the coordination of organ donations, LOTS has grown to become a multifaceted, nonprofit organization dedicated to saving and improving lives. Its delivery of services requires the careful coordination of partners, collaborators, and key suppliers to ensure that organs and tissues are available for use by the organization's key customer groups.

- b. Key competitors (those that constitute 5 percent or more of your competitors)

As the federally designated OPO within its service area, LOTS does not have traditional competitors. Much like a utility company, LOTS is a regulated "monopoly" that operates solely within the borders of its designated service area (DSA); no other OPOs may procure organs within this boundary.

- c. Key customers/users (those that constitute 5 percent or more of your customers/users)

Local organ transplant centers (Premier Health, Columbia University Hospital, Premier Children's Hospital, and Columbia Children's Hospital) and tissue processors (Tissue Transformations, LifeBank, and Advantage Life)

- d. Key suppliers/partners (those that constitute 5 percent or more of your suppliers/partners)

Allograft Resources, Columbia Cremation, Excel Employee Engagement, Guardian Ambulance, Learning Development Institute, LinkingSmart, Survey System Success, Titan Technology (TT), Transplant Technologies, and Wright Brothers Charter

- e. Financial auditor                      Fiscal year (e.g., October 1–September 30)

Brother, Sister, & Auditor	January 1–December 31
Parent organization (if your organization is a subunit).	N/A

## 11. Nomination to the Board of Examiners

If your organization is eligible to apply for the Baldrige Award in 2019, you may nominate one senior member from your organization to the 2019 Board of Examiners.

Nominees are appointed for one year only. Nominees

- **must not have served previously on the Board of Examiners** and
- must be citizens of the United States, be located in the United States or its territories, and be employees of the applicant organization.

The program limits the number of examiners from any one organization. If your organization already has representatives on the board, nominating an additional person may affect their reappointment.

Board appointments provide a significant opportunity for your organization to learn about the Criteria and the evaluation process. The time commitment is also substantial: examiners commit to a minimum of 200 hours from April to August, including approximately 40-60 hours in April/May to complete self-study, four days in May to attend Examiner Preparation, and 95-130 hours from June through August to complete an Independent and Consensus Review. If requested by the program, examiners also participate in a Site Visit Review of approximately nine days. The nominee or the organization must cover travel and housing expenses incurred for Examiner Preparation.

Mr.    Mrs.    Ms.    Dr.

Bart Wilson

from our organization will serve on the 2019 Board of Examiners.

bart.wilson@LOTS.opo

Email address

I understand that the nominee or the organization will cover travel and hotel costs associated with participation in Examiner Preparation. I also understand that if my organization is determined to be ineligible to apply for the Baldrige Award in 2019, this examiner nomination will not be considered for the 2019 Board of Examiners.

## 12. Self-Certification and Signature

I state and attest the following:

- (1) I have reviewed the information provided in this eligibility certification package.
- (2) To the best of my knowledge,
  - this package includes no untrue statement of a material fact, and
  - no material fact has been omitted.
- (3) Based on the information herein and the current eligibility requirements for the Malcolm Baldrige National Quality Award, my organization is eligible to apply.
- (4) I understand that if the information is found not to support eligibility at any time during the 2019 award process, my organization will no longer receive consideration for the award and will receive only a feedback report.

*Marie Jamerson*

Signature of highest-ranking official

Marie Jamerson

Printed name

Feb. 10, 2019

Date

## 13. Submission

To be considered for the 2019 award, your complete eligibility certification package *must be postmarked no later than* February 13, 2019, to

Malcolm Baldrige National Quality Award  
c/o ASQ—Baldrige Award Administration  
600 North Plankinton Avenue  
Milwaukee, WI 53203  
(414) 298-8789, ext. 7205

Include proof of the mailing date. Send the package via

- a delivery service (e.g., Airborne Express, Federal Express, United Parcel Service, or the United States Postal Service [USPS] Express Mail) that automatically records the mailing date or the USPS (other than Express Mail), with a dated receipt from the post office.

Do you authorize ASQ to return copies of your date-stamped eligibility forms (required to be included in your application package) via email? *If you check “no” below, the copies will be returned to you via Federal Express.*

Yes  No

## 14. Fee

Indicate your method of payment for the \$400 eligibility certification fee.

<input checked="" type="checkbox"/> Check (enclosed) <input type="checkbox"/> Money order (enclosed) <i>Make payable to the <b>Malcolm Baldrige National Quality Award</b>.</i>			
<input type="checkbox"/> ACH payment <input type="checkbox"/> Wire transfer		Checking ABA routing number: Checking account number:	
<i>Before sending an ACH payment or wire transfer, notify the American Society for Quality (ASQ; [414] 298-8789, ext. 7205, or <a href="mailto:BaldrigeContractAdmin@asq.org">BaldrigeContractAdmin@asq.org</a>). Reference the Baldrige Award with your payment.</i>			
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express			
Card number		Authorized signature	
Expiration date		Printed name	
Card billing address		Today's date	

**W-9 Request:** If you require an IRS Form W-9 (Request for Taxpayer Identification Number and Certification), contact ASQ at (414) 298-8789, ext. 7205.



## 1. Eligibility Certification Form\*

- I have answered all questions completely.
- I have included a line-and-box organization chart showing all components of the organization and the name of each unit or division and its leader.
- The highest-ranking official has signed the form.

### For Organizations Submitting Additional Eligibility Screening Materials (to meet the alternative eligibility condition no. 8 for question 6k; see the table on page E-4)

- I have enclosed a complete Organizational Profile.
- I have enclosed data for two results measures for each of the five Criteria results items.

### For Subunits Only

- I have included a line-and-box organization chart(s) showing the subunit's relationship to the parent's highest management level, including all intervening levels.
- I have enclosed copies of relevant portions of an official document clearly defining the subunit as a discrete entity.

*\*Please do not staple the pages of this form.*

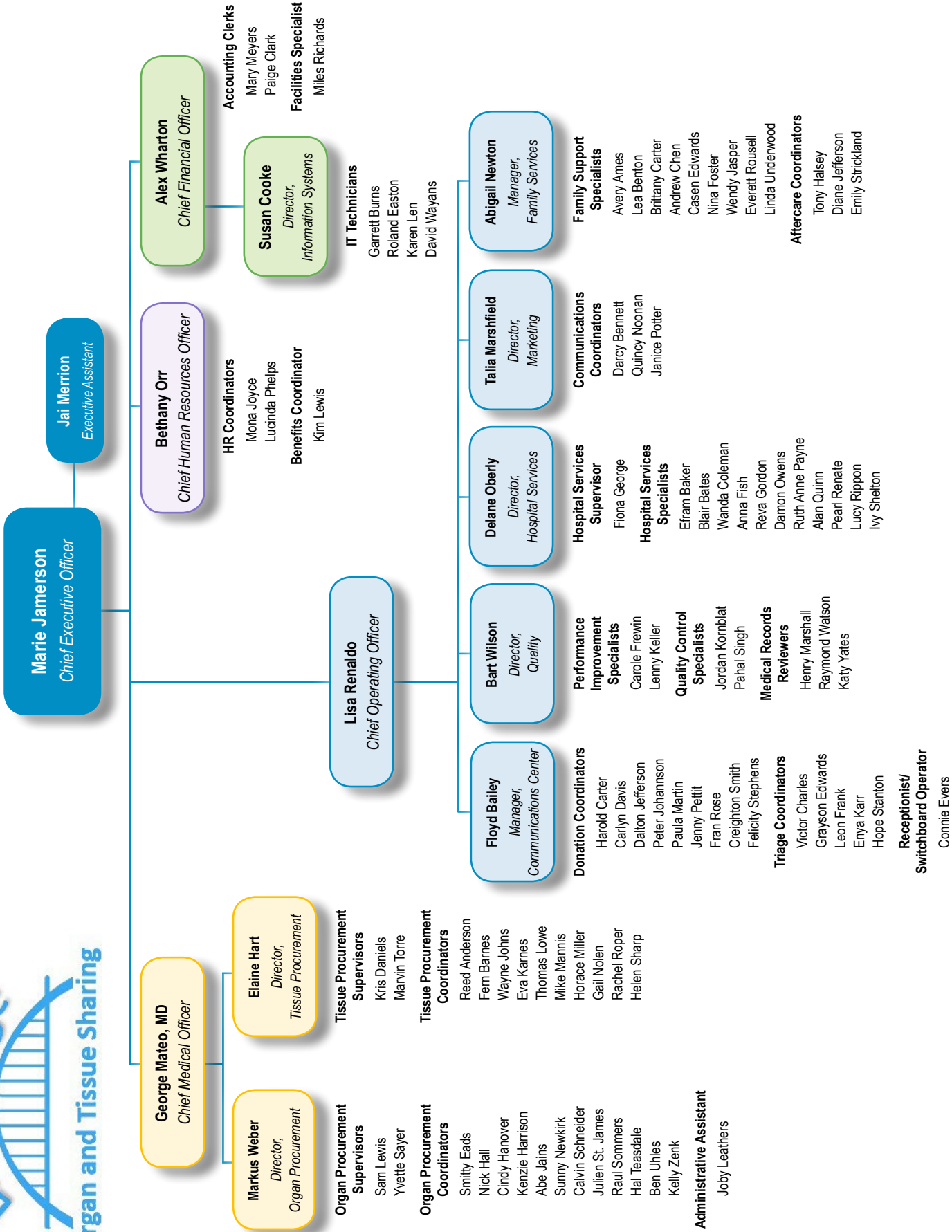
## 2. Fee

- I have indicated my method of payment for the nonrefundable \$400 eligibility certification fee.
- If paying by check or money order, I have made it payable to the **Malcolm Baldrige National Quality Award** and included it in the eligibility certification package.

## 3. Submission and Baldrige Examiner Nomination

- I am nominating a senior member of my organization to the 2019 Board of Examiners.
- I am not nominating a senior member of my organization to the 2019 Board of Examiners.
- I am sending the complete eligibility certification package to  
Malcolm Baldrige National Quality Award  
c/o ASQ—Baldrige Award Administration  
600 North Plankinton Avenue  
Milwaukee, WI 53203  
(414) 298-8789, ext. 7205
- I have included proof of the mailing date. (See [Application Form and Content](#) instructions at <https://www.nist.gov/baldrige/application-content-and-format/>.)

# ORGANIZATION CHART



PAGE A-1  
OF THE  
2019 AWARD  
APPLICATION FORM

## 1. Your Organization

Official name	LifeBridge Organ and Tissue Sharing
Mailing address	444000 Georgie Blvd, Suite 100 Columbia, NT 01011

## 2. Award Category and Criteria Used

- a. Award category (Check one.)
- Manufacturing
- Service
- Small business. The larger percentage of sales is in (*check one*)  Manufacturing  Service
- Education  Health care
- Nonprofit
- b. Criteria used (Check one.)
- Business/Nonprofit  Education
- Health Care

## 3. Official Contact Point

Designate a person with in-depth knowledge of the organization, a good understanding of the application, and the authority to answer inquiries and arrange a site visit, if necessary. *Contact between the Baldrige Program and your organization is limited to this individual and the alternate official contact point. If this official contact point changes during the application process, please inform the program.*

Mr.  Mrs.  Ms.  Dr.

Name	Bart Wilson
Title	Director, Quality
Mailing address	<input checked="" type="checkbox"/> Same as above
Overnight mailing address	<input checked="" type="checkbox"/> Same as above ( <i>Do not use a P.O. box number.</i> )
Telephone (office and cell, if possible)	252-555-0072 (office); 123-555-2715 (cell)
Fax	123-555-1000
Email	bart.wilson@LOTS.opo

## 4. Alternate Official Contact Point

Mr.  Mrs.  Ms.  Dr.

Name	Lisa Renaldo
Telephone	123-555-0007
Fax	123-555-1000
Email	lisa.renaldo@LOTS.opo

## 5. Release and Ethics Statements

### Release Statement

I understand that this application will be reviewed by members of the Board of Examiners. If my organization is selected for a site visit, my organization will

- host the site visit, facilitate an open and unbiased examination, and
- pay reasonable costs associated with the site visit (see [Baldrige Award Process Fees](https://www.nist.gov/baldrige/baldrige-award/award-process-fees/) at <https://www.nist.gov/baldrige/baldrige-award/award-process-fees/>).

If selected to receive an award, my organization will share nonproprietary information on its successful performance excellence strategies with other U.S. organizations.

### Ethics Statement and Signature of Highest-Ranking Official

#### I state and attest that

- (1) I have reviewed the information provided by my organization in this award application package.
- (2) To the best of my knowledge, this package contains no untrue statement of a material fact and omits no material fact that I am legally permitted to disclose and that affects my organization's ethical and legal practices. This includes but is not limited to sanctions and ethical breaches.

<i>Marie Jamerson</i>	April 19, 2019
-----------------------	----------------

Signature Date

Mr.  Mrs.  Ms.  Dr.

Printed name	Marie Jamerson
Job title	Chief Executive Officer
Applicant name	LifeBridge Organ and Tissue Sharing
Mailing address	<input checked="" type="checkbox"/> Same as above
Telephone	123-555-0001
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Fax	252-555-0100

# GLOSSARY OF TERMS AND ABBREVIATIONS

## Glossary of Terms and Abbreviations

**24/7**

24 Hours a Day/7 Days a Week

### A

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**AATB**

American Association of Tissue Banks

**ADA**

Americans with Disabilities Act

**AED**

Automated External Defibrillators

**AOPO**

Association of Organ Procurement Organizations

**AOS**

Available On-Site

**AP(s)**

Action Plan(s)

**Authorization**

Permission or power granted by an authority (first person or next-of-kin) for organ and/or tissue donation

### B

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**BOD**

Board of Directors

### C

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**CAPA**

Corrective Action Preventive Action

**C&C**

Capability and Capacity

**CC**

Core Competency: Mission-driven workforce

**CCP**

Corporate Compliance Program

**CDC**

Centers for Disease Control and Prevention

**CEO**

Chief Executive Officer

**CFO**

Chief Financial Officer

**CHRO**

Chief Human Resources Officer

**CLIA**

Clinical Laboratory Improvement Amendments

**CMO**

Chief Medical Officer

**CMS**

Centers for Medicare and Medicaid Services

**COI**

Conflict of interest

**Conversion Rate**

Percentage of actual donors divided by potential donors

**COO**

Chief Operating Officer

### D

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**DART Rate**

Days away, restricted, or transferred (OSHA Form 300a)

**Data Mall**

Repository of predefined reports that allow the user to access valuable organizational data for decision making

**DCD**

Donation after Cardiac Death-type of donation for organ procurement that occurs after cardiac cessation

**DHSS**

U.S. Department of Health and Human Services

**DMV**

Department of Motor Vehicles

**DoL**

Department of Labor

**DonorNet**

Facilitates organ placement and acceptance by rapidly and efficiently providing key information to organ transplant centers

**DOR**

Department of Revenue (for state of NT)

**DSA**

Designated Service Area

### E

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**EBAA**

Eye Bank Association of America

**EEOC**

Equal Employment Opportunity Commission

**EKR**

Employee Key Requirement

**ELT**

Executive Leadership Team consisting of the CEO, CMO, CHRO, CFO, and COO

**EMB**

Extended Medical Bank-employee benefit to cover extended illnesses

**EMR**

Electronic Medical Record

**ERP**

Emergency Response Plan

**F**

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**FDA**

Food and Drug Administration

**FLSA**

Fair Labor Standards Act

**Four As**

Complaint Resolution Process: Acknowledge, Apologize, Ask, Act

**FSS**

Family Support Services

**FTE**

Full-Time Employee

**G**

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**Gift of Life**

Organs and tissues donated by donor families

**GPR**

National organization providing comparative satisfaction and engagement data.

**H**

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**HLA**

Human Leukocyte Antigen

**HR**

Human Resources

**HRSA**

Health Resources and Services Administration

**I**

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**ICU**

Intensive Care Unit

**Individual Scorecards**

Measurement system tool tracked at the individual level

**IT/IS**

Information Technology/Information Systems

**L**

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**LDS**

Learning and Development System

**LOTS**

LifeBridge Organ and Tissue Sharing

**LS**

Leadership System

**LT**

Leadership Team

**M**

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**ME**

Medical Examiner

**O**

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**OAC(s)**

Organ Acquisition Charge(s), the cost that is billed to the transplant centers for the procurement of organs; includes all direct and indirect costs

**OD(s)**

Operational Discussions

**OMP**

Operational Management Process

**OPC**

Organ Procurement Coordinator

**OPO**

Organ Procurement Organization

**OPTN**

Organ Procurement and Transplantation Network

**OR**

Operating Room

**Organ**

Refers to kidneys, lungs, liver, heart, intestines, and pancreas

**Organ Conversion**

Percentage of actual organ donors divided by potential organ donors

**Organ Yield**

Organs transplanted per donor

**OSHA**

Occupational Safety and Health Administration

**OWS**

Organ Work System



## P

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### **PDSA**

Plan-Do-Study-Act problem-solving performance improvement tool/methodology

### **PEP**

Performance Evaluation Process

### **PHI**

Personal Health Information

### **PHS**

Public Health Services

### **PI**

Performance Improvement

### **PII**

Personally Identifiable Information

### **PMS**

Performance Measurement System

### **PTO**

Paid/Personal Time Off

## Q

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### **QAPI**

Quality Assessment and Performance Improvement

### **QS**

Quality Systems

## R

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### **RFO**

Rounding for Outcomes

### **ROI**

Return on Investment

## S

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### **SA(s)**

Strategic Advantage(s)

### **SaaS**

Software as a Service

### **SC(s)**

Strategic Challenge(s)

### **SD(s)**

Strategic Discussion(s)

### **SO(s)**

Strategic Objective(s)

### **SOP(s)**

Standard Operating Procedure(s)

## SPP

Strategic Planning Process

## SQA

State Quality Award

## SRTR

Scientific Registry of Transplant Recipients

## SWOT

Strengths, Weaknesses, Opportunities, Threats analysis, part of environmental scanning

## T

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### **Tissue**

Refers to musculoskeletal, skin, cardiovascular, and eye

### **Tissue Yield**

Tissue procured per donor

### **TOPC**

Tissue Ocular Procurement Coordinators

### **Topline Scorecard**

Performance measurement tool reflecting status of key organizational metrics

### **TT**

Titan Technology

### **TWS**

Tissue Work System

## U

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### **UAGA**

Uniform Anatomical Gift Act

### **UNOS**

United Network for Organ Sharing

## V

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### **V/M**

Vision/Mission

### **V/M/V**

Vision/Mission/Values

### **VOC**

Voice of the Customer

### **VOS**

Voice of the Stakeholder

### **Yield**

Outcomes of donation activities

### **YTD**

Year to Date

# ORGANIZATIONAL PROFILE

## Organizational Profile

Picture Sally, who is only 16 years old, a typical teenager who loves her friends, family, and dog, Spot, and is a beloved daughter, sister, and friend. Following a critical injury during a car accident, she is now in the intensive care unit. After evaluating Sally's injuries and performing life-saving measures, doctors have diagnosed conclusively that Sally is brain-dead. Machines keep her organs functioning, while a team from LifeBridge Organ and Tissue Sharing (LOTS) talks compassionately to Sally's family about donating her organs and tissues. On the most agonizing day of this family's life, family members find the courage to say "yes." Sally saved multiple lives that day, including a three-year-old boy from North Takoma who received Sally's left kidney and was then excited to go home with his family after being in the hospital since birth; a 56-year-old father, a factory worker from South Takoma, who had been waiting for a liver for four years; and a nine-year-old fire victim who was airlifted to a state hospital with burns on over 50 percent of her body who received Sally's skin tissue that helped keep out infection while the victim's skin regenerated. The ability to impact countless lives motivated Sally's family to provide the literal "Gift of Life" to waiting recipients. The ability to provide the connection between life and death is the reason LOTS staff members come to work every day—to achieve the organization's mission to save and improve lives.

### P.1 Organizational Description

#### P.1a Organizational Environment

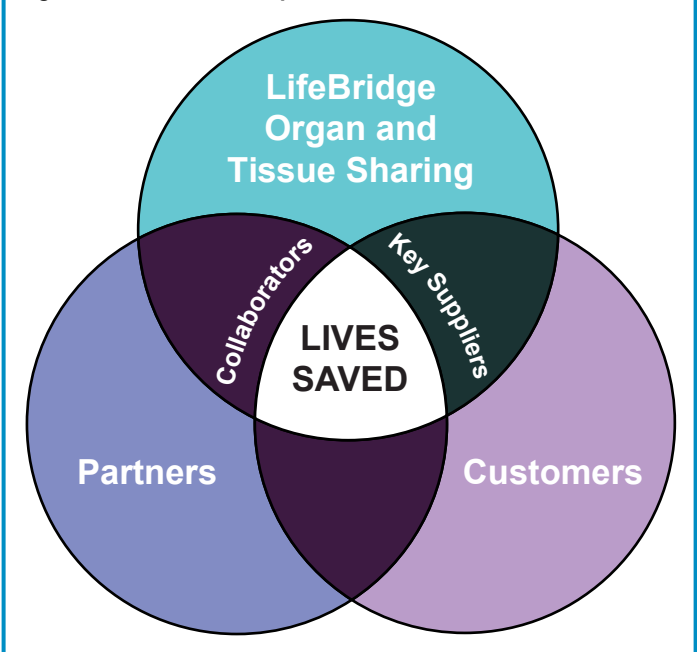
**P.1a(1)** For more than 25 years, LOTS has served as the regional organ and tissue procurement organization (OPO) for 3.2 million people living within a federally assigned territory inclusive of 62 counties located within the states of North Takoma (NT) and South Takoma (ST). From its founding goal to assist in the coordination of organ donations, LOTS has grown to become a multifaceted, nonprofit organization dedicated to saving and improving lives (*Figure P.1-1*). Located in Columbia, NT, LOTS is one of the 58 federally designated organizations of its kind in the United States.

LOTS's main service offering is the facilitation of organ and tissue donation, accomplished through the organization's two work systems: Organ and Tissue. The delivery of services for both work systems requires the careful coordination of partners, collaborators, and key suppliers to ensure that organs and tissues are available for use by the organization's key customer groups (*Figure P.1-6*). Both service lines (organ and tissue) are critical to LOTS's success, which is measured by the number of lives saved and improved. The Partnership Model (*Figure P.1-2*) highlights the organization's coordination of partners, collaborators, and suppliers to ensure that organs and tissues are always available for the organization's key customers.

Figure P.1-1: Vision, Mission, Values

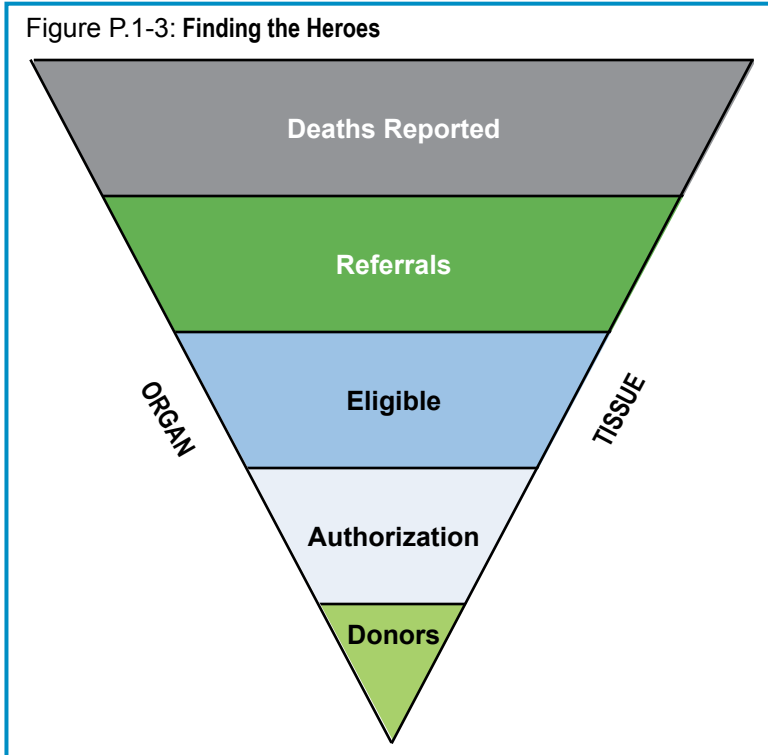
<b>VISION</b>	Organs and tissues are always available		
<b>MISSION</b>	We save and improve lives		
<b>VALUES</b>	Compassion	Teamwork	Honesty
	Quality	Improvement	

Figure P.1-2: Partnership Model



Donor families come from the community at large and are identified as potential collaborators once a partner notifies LOTS of a patient's death. At this point, assuming the patient is medically suitable for donation, the family is presented with the opportunity for donation by a member of the LOTS's workforce. Due to the limiting criteria governing organ and tissue donation, each donation opportunity must be maximized to its fullest potential. Of the approximately 15,000 deaths occurring annually within LOTS's designated service area (DSA), approximately 100 patients have the opportunity to become organ donors due to the special circumstances of brain death under which an organ donor must die. Tissue donation opportunities occur approximately 2,000 times annually (*Figure P.1-3*).

LOTS partners with the 80 hospitals and several nonhospital referral organizations (medical examiner [ME] and hospice offices) located within its DSA to gain access to potential donor family collaborators, a critical control point of the



Procurement Process (*Figure 2.1-2*). LOTS provides ongoing educational offerings to these partners to ensure that this introduction occurs in a timely manner. Once a referral is made, LOTS prescreens the potential donor for medical eligibility for donation. Patient families are compassionately approached by Family Support Services (FSS) staff in the Organ Work System (OWS) and by the Communication Center staff in the Tissue Work System (TWS). During the approach, families are presented with the opportunity for donation or to honor their loved one’s previous decision to become a donor (*Figure 3.2-1*, Pre-Donation Phase). Clinical staff members assist the donor hospital partners with the medical management of the donor until transportation to the LOTS facility occurs and the donated gifts are recovered (*Figure 3.2-1*, Donation Phase). In the OWS, recovery is performed by the transplant surgeon assisted by Organ Procurement Coordinators (OPCs); in the TWS, recovery is performed by Tissue Procurement Coordinators (TPCs). LOTS acts as a responsible steward of the “Gift of Life” by coordinating the placement of donated organs and tissues to its key customer groups: local organ transplant centers and tissue processors. The donated organs and tissues are used for the betterment of the communities served, which include donor families and transplant recipient patients and their families (*Figure P.1-6*).

**P.1a(2)** The mission of LOTS is to save and improve lives (*Figure P.1-1*). LOTS’s vision is *Organs and tissues are always available*. The vision was developed in light of the belief that the organization’s ultimate goal will only be realized when organs and tissue are readily available to patients when they need them. Central to the LOTS culture is a strong

drive to meet the mission: *We save and improve lives*. By definition, the mission affirms that LOTS plays a role in the life-saving gift of donation. Whether it is the “literal life save” of an organ recipient or a “quality of life improvement to a tissue recipient,” at its core, LOTS is all about transplantation and saving and improving lives. Values of compassion, improvement, honesty, teamwork, and quality serve as a guiding force for how the workforce lives the culture on a daily basis. The vision, mission, and values (V/M/V) of LOTS, validated during the Strategic Planning Process (SPP; *Figure 2.1-1*), serve as the foundation for the culture and form the basis for how the organization is managed. The mission of LOTS could not be accomplished without the organization’s core competency (CC) of a mission-driven workforce.

*Mission-Driven Workforce:* The work of LOTS, by its very nature, requires a level of care and compassion that can only be delivered by the “human touch.” Therefore, the actions and behaviors demonstrated by the staff are directly linked to creating a positive donation experience for the donor family (collaborators), which is essential to the accomplishment of the mission and the success of the organization. This CC was identified using several cycles of LOTS’s

workforce survey results, which noted that overall engagement and overall job satisfaction continue to show strong results (*Figures 7.3-12, 7.3-12A, and 7.3-14*).

**P.1a(3)** LOTS is a 24/7 business in which many of the employees are decentralized. The Workforce Profile (*Figure P.1-4*) reflects the employee profile and includes job type, tenure, gender, and ethnicity. To date, the organization has not experienced any reductions in workforce. Conversely, as the need for donations has increased, so has the need for expansion of both clinical and nonclinical staff to support operational efficiencies. For the purpose of reporting and

**Figure P.1-4: Workforce Profile (Employees)**

Job Type	Leadership Team 10%	Gender	Male 35%
	Staff 90%		Female 65%
Tenure	<1 Year 20%	Ethnicity	African American 20% (DSA 25%*)
	2–5 Years 41%		White 70% (DSA 70%*)
	6–10 Years 21%		Other 10% (DSA 5%*)
	11+ Years 18%		

\*Based on 2010 Census

comparing data, the workforce is segmented by work system and department. The OWS manages the Procurement Process for organs, the TWS manages the Procurement Process for tissues, and the support departments provide the infrastructure to maximize organizational performance (*Figure 2.1-2*). The organization does not utilize the assistance of volunteers. Workforce educational requirements, including applicable certifications, may vary by work system and department and are included in all job descriptions. In addition, the Learning and Development System (LDS; *Figure 5.2-2*) includes components that allow the tracking of personal goals and certifications in the online Performance Evaluation Process (PEP; *Figure 5.1-2*). Utilizing the Communication Process (*Figure 1.1-3*), LOTS routinely underscores that every role in the organization contributes to the success of the mission. Multiple staff survey cycles have validated three of the highest-scoring survey attributes: the staff connection to the mission, followed closely by employee benefits and relationships with coworkers.

LOTS has no organized bargaining units. All employees require a healthy, safe, and secure work environment. LOTS’s approaches to address these requirements include system-wide programs focusing on risks in particular settings. Many members of the workforce carry out clinical duties in a hospital, rather than perform work in an office. Health and safety issues related to staff working in hospitals also apply to nonclinical staff. Similarly, typical office-related safety requirements apply to nonclinical staff. At LOTS, such issues are addressed through annual training and standard operating procedures (SOPs). Due to the 24-hour nature of some work, for “after-hours” staff members, special safety requirements exist that include reserved office parking spots, secured parking, and sensor lighting (5.1b[1]).

**P.1a(4)** LOTS owns a custom-built facility in Columbia, NT, which houses a critical care unit where organ donor management occurs and with a fully equipped operating room (OR). The key clinical technologies and equipment include x-ray, ultrasound, and typical OR equipment. LOTS leases a twin-engine turbo prop plane equipped with medical equipment to transport donors to the LOTS facility for organ and tissue recovery. Utilizing technology, LOTS provides staff with collaborative tools, real-time access to key data including an electronic medical record (EMR) system, and reporting services that provide customized reports.

**P.1a(5)** LOTS operates under a highly regulated environment and identifies key regulatory requirements in Quality Compliance Management (*Figure P.1-5*). In addition, local environmental and regulatory initiatives apply for fire and sanitation measures; biohazard trash disposal meets all local and state regulations.

### P.1b Organizational Relationships

**P.1b(1)** Incorporated in the state of North Dakota, LOTS is a private, nonprofit 501(c)(3) organization. A voluntary, community-based governance Board of Directors (BOD) sets policy

Figure P.1-5: Quality Compliance Management		
Regulatory Agency		Mandatory/ Voluntary
CAP	Safe Laboratory Practices	Mandatory
CMS	Billing and Performance Requirements	Mandatory
EEOC	Employment Practices	Mandatory
FDA	Compliance with Requirements	Mandatory
DoL	Employment Practices	Mandatory
IRS	Nonprofit Requirements	Mandatory
UNOS/ OPTN	Organ Allocation/Operational Oversight	Mandatory
Occupational Health and Safety		
OSHA	Workplace Safety	Mandatory
Accreditation		
AATB	Standards for Tissue Banking Accreditation	Voluntary
AOPO	Standards for Organ Procurement Accreditation	Voluntary

for the organization and is composed of hospital executives, physicians, and donor family members. Representatives from LOTS’s key donor hospitals (partners) and transplant centers (customers) are appointed, allowing these senior leaders to represent customer and partner requirements. Reporting to the governance board, the Chief Executive Officer (CEO) directs an Executive Leadership Team (ELT) composed of the Chief Medical Officer (CMO), Chief Human Resources Officer (CHRO), Chief Financial Officer (CFO), and Chief Operating Officer (COO). The Leadership Team (LT) consists of the ELT and the directors, managers, and supervisors.

The BOD evaluates the performance of the CEO utilizing ongoing monitoring of performance measures as outlined in the Scorecard Review Process noted in 1.2a(2). The CEO evaluates the performance of her direct reports, and those reports evaluate the performance of the directors, who, in turn, evaluate managers and other members of the staff.

**P.1b(2)** *Figure P.1-6* outlines LOTS’s key customers, partners, and stakeholders, as well as the requirements and expectations for the organization’s services and operations for each group. LOTS’s key market segment is the organization’s DSA, which is assigned by the federal government. Local organ transplant centers (Premier Health, Columbia University Hospital, Premier Children’s Hospital, and Columbia Children’s Hospital) and tissue processors (Tissue Transformations, LifeBank, and Advantage Life) are LOTS’s key customer groups. LOTS collaborates with the donor families

to honor their loved ones’ decisions to be donors or on behalf of their loved ones; donor family requirements are the same regardless of donation type.

**P.1b(3)** LOTS recognizes that key suppliers, partners, and collaborators play an important role in supporting it in achieving its vision, mission, and strategic objectives (SOs). Key suppliers include Guardian Ambulance, Wright Brothers Charter, Titan Technology (TT), Transplant Technologies, and Columbia Cremation (*Figure P.1-6*). These organizations have made significant business model accommodations to provide 24/7 availability to ensure that the donation can proceed smoothly. Guardian Ambulance, Wright Brothers Charter, and Columbia Cremation provide air and ground transportation services for staff, as well as organ and tissue donors, ensuring that the donation is expedited. TT provides all routine maintenance and infrastructure support of information technology (IT), allowing the internal IT staff employed by LOTS to focus on technologies specific to the OPO industry. Transplant Technologies provides the EMR system, including the platform that allows sequel reporting functions, which are a critical part of the Performance Measurement System (PMS; *Figure 4.1-1*). Transplant Technologies also affords the organization the ability to upload tissue donor records to the processors to ensure timely release of tissue. These suppliers, partners, and collaborators provide LOTS with the ability to assess process performance and enhance competitiveness by exceeding customer requirements. As LOTS’s key partners and main referral sources, donor hospitals and nonhospital referral sources are essential to gaining access to potential donor families. Through ongoing training, the Hospital Services staff assists with the establishment of systems that initiate the pre-donation Authorization Process (through the Referral Management Process) and support the donation decision. Once a referral to LOTS is made, a LOTS staff member presents the option of donation to the potential donor family. As collaborators, donor family members provide authorization for donation on behalf of their loved ones or to honor their loved ones’ documented authorization to be an organ and/or tissue donor. For donor family collaborators, two-way communication occurs during the Pre-Donation Phase via face-to-face conversations (OWS) and by phone (TWS). The primary methods for knowledge sharing and communication with suppliers, collaborators, and partners are noted in Voice of the Stakeholder (VOS; *Figure 4.2-1*); primary methods for customer communication are noted in Voice of the Customer (VOC; *Figure 3.1-1*). Supplier and partner communication is mainly conducted via two-way communication and face-to-face meetings with follow-up communication via phone and email. Inputs from partners and collaborators, as well as other key stakeholders, feed into the SPP (*Figure 2.1-1*) and help drive organizational improvements. LOTS’s key supply-network requirements for suppliers include timely communication, accurate information, and service quality (*Figure P.1-6*).

Figure P.1-6: Key Stakeholder Requirements	
Customers	Requirements
Transplant Centers—Organ	<ul style="list-style-type: none"> <li>• Maximize Donation</li> <li>• Information</li> <li>• Competence</li> </ul>
Tissue Processors	<ul style="list-style-type: none"> <li>• Maximize Donation</li> <li>• Information</li> <li>• Accountability</li> </ul>
Partners	
Donor Hospitals Medical Examiners Hospice	<ul style="list-style-type: none"> <li>• Respect/Sensitivity</li> <li>• Information</li> <li>• Service Quality</li> </ul>
Collaborators	
Organ and Tissue Donor Families	<ul style="list-style-type: none"> <li>• Compassion</li> <li>• Stewardship of the Gift</li> <li>• Honor the Donor</li> </ul>
Funeral Homes	<ul style="list-style-type: none"> <li>• Communication</li> <li>• Service</li> </ul>
Stakeholders	
Communities within Service Area	<ul style="list-style-type: none"> <li>• Comply with Legal, Ethical, and Regulatory Requirements While Providing Quality Organs and Tissues</li> </ul>
Workforce	<ul style="list-style-type: none"> <li>• Connection with V/M/V</li> <li>• Excellent Benefits</li> <li>• Coworkers</li> </ul>
Board of Directors	<ul style="list-style-type: none"> <li>• Strategic Planning</li> <li>• Administration</li> <li>• Financial Management</li> </ul>
Suppliers	Expectations
Guardian Ambulance Wright Brothers Charter TT Transplant Technologies Columbia Cremation	<ul style="list-style-type: none"> <li>• Accurate Information</li> <li>• Service Quality</li> <li>• Timely Communication</li> </ul>

## P.2 Organizational Situation

### P.2a Competitive Environment

**P.2a(1)** As the federally designated OPO within its service area, LOTS does not have traditional organ procurement competitors. Much like a utility company, LOTS is a regulated “monopoly” that operates solely within the borders of its DSA; no other OPOs may procure organs within this boundary. To maintain this designation, however, OPOs must

meet national performance standards set by the Centers for Medicare and Medicaid Services (CMS). Should performance consistently fall short of the national standards, CMS could choose to award the DSA to another OPO. While OPOs do not compete for organs, the reassignment of potential future DSAs would be based on performance to the standards. For the TWS, donor hospitals are required by law to report all deaths to LOTS; however, they may contract with another tissue bank at their own discretion for the recovery process. LOTS maintains tissue recovery contracts with 100% of the 80 donor hospital partners within its service area. LOTS partners with an eye bank, VisionMax, to ensure eye donation opportunities for families in the DSA. LOTS ranks 40th among the existing 58 OPOs in terms of population living within its DSA. Since expansion of the DSA is not allowed, growth in donation must come from increases in medically eligible candidates from within the DSA, from increases in the number of families who say “yes” (authorization) to donation, or from the identification of nonhospital referral sources. The constraints of a limited service area reinforce the importance of maximizing donation for each donor in order to achieve the mission of saving lives (*Figure P.1-3*).

**P.2a(2)** Because LOTS does not have competitors in the traditional sense, there are no key changes taking place that affect the organization’s competitive position as an OPO. While the changes to the Affordable Care Act will be a challenge for the health care industry, the scope of its changes to the OPO industry is uncertain at this time. As such, the organization has decided to focus on what it can control; utilizing LOTS’s drive and proven ability to improve and rely on its mission-driven workforce (CC) to achieve cost-effectiveness and efficiencies to place itself in a strong financial position (SA) to manage future challenges. Key factors influencing the success of LOTS include

- A mission-driven workforce that is highly motivated and engaged in *saving lives* (CC)
- Strong relationships formed through partnering and collaboration

As stated previously, the OWS and TWS do not currently have competitors.

**P.2a(3)** The Comparative Data Process (*Figure 4.1-4*) lists the organization’s key comparative data sources. The organ industry has select national benchmarks available through multiple sources; however, the lead time before such results become available can be many months. Comparative data are more limited for tissue operations, in which tissue processors provide monthly feedback for select results in the form of scorecards. To offset these limitations, LOTS relies on sharing through collaboration with other OPOs to obtain comparative data.

## P.2b Strategic Context

Strategic Challenges (SCs) and Advantages (SAs; *Figure P.2-1*) provides a summary that reflects the current strategic state of LOTS. SCs and SAs are reviewed annually during step 3 of

Figure P.2-1: Strategic Challenges and Advantages	
<b>Challenges</b>	
Business	• Industry Changes
Operational	• Authorization
Societal Responsibility	• Increase Registry
Workforce	• Retention
<b>Advantages</b>	
Business	• Stakeholder Satisfaction
Operational	• Facilities and Equipment
Societal Responsibility	• Baldrige Business Model
Workforce	• Supportive Culture

the SPP (*Figure 2.1-1*); steps 5 through 8 ensure that appropriate action plans (APs) are linked to organizational success.

## P.2c Performance Improvement System

Together with the BOD, the LOTS LT creates an environment that supports improvement through the creation of strategies, systems, and methods for achieving performance excellence. The Leadership System (LS; *Figure 1.1-1*) is used to set and deploy the V/M/V and culture to the workforce via the Communication Process (*Figure 1.1-3*). LOTS has developed an organizational structure, processes, and culture to focus on action and achieve sustainable performance, foster improvement, and seek out strategic opportunities. A continuous process improvement environment allows LOTS to deliver a distinctive value stream that benefits both the performance of customer-focused operations and the lives of organ and tissue recipients.

LOTS uses the Baldrige Criteria for Performance Excellence as its business model and its foundation for performance improvement (PI). Ultimately, this model provides ongoing feedback into the SPP. Additionally, step 3 of the LS (*Figure 1.1-1*) provides key business process monitoring to align business strategy to organizational performance. Operational improvements are identified and implemented through the SPP and the Operational Management Process (OMP; *Figure 6.1-1*). Both processes bring to the forefront key information to manage the business, aggregate data, create actions that synthesize information into knowledge, and ultimately facilitate the sharing of knowledge, both internally and externally. Performance improvement staff are part of the Quality/Regulatory department and help support the overarching organizational goal of improvement. To monitor success, the PMS (*Figure 4.1-1*) is used. The over-arching approach, formal and informal, to support process improvement efforts is the Plan-Do-Study-Act (PDSA) problem-solving methodology. This methodology is embedded in LOTS’s improvement processes.

RESPONSES  
ADDRESSING ALL  
CRITERIA ITEMS



## Category 1: Leadership

### 1.1 Senior Leadership

#### 1.1a Vision and Values

**1.1a(1)** LOTS LS (*Figure 1.1-1*) provides direction for an engaged workforce that successfully facilitates organ and tissue donation in alignment with the Vision and Values (V/V; *Figure P.1-1*). During a recent SPP session, LOTS reviewed the V/V of the organization. This revalidation process incorporated employee input using an internal survey. The V/V were updated, vetted, and ratified by the BOD.

The LT deploys the V/V and culture to the workforce, as well as to customers, stakeholders, partners, and suppliers, via multiple communication mechanisms as managed by the Communication Process (*Figure 1.1-3*). Examples include

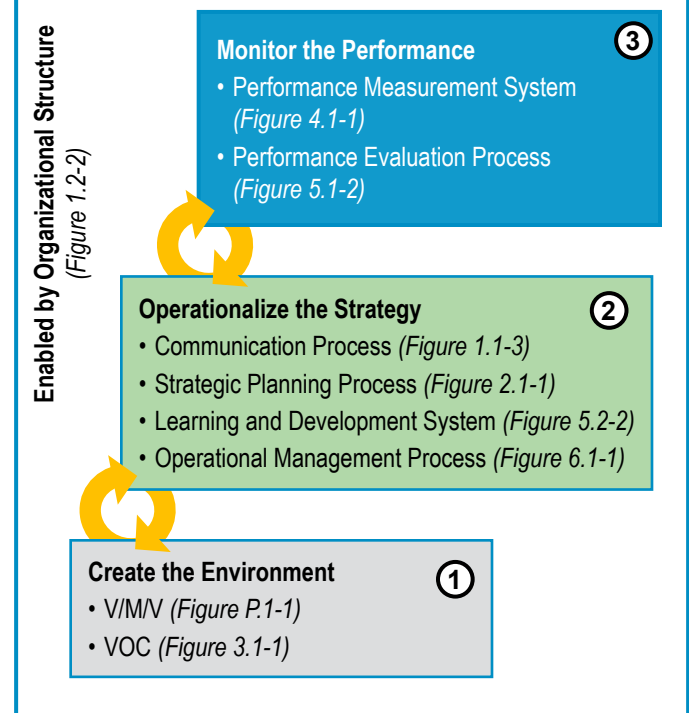
- Reviewing and emphasizing the V/M/V during board, staff, and department meetings
- Incorporating the stories of donor families, recipients, and patients waiting for a transplant into multiple communication methods

The LT members serve as role models and demonstrate their commitment to the core values by setting the culture via the LS, including through daily practice and during staff meetings, during department meetings, and in conversations in Rounding for Outcomes (RFO). Leaders provide personal acknowledgment to employees for demonstrating behaviors consistent with the organization's core values. The LT uses a 360-degree review to provide systematic feedback to all LT members from peers and direct reports pertaining to the leader's individual effectiveness, including exhibiting behaviors consistent with the V/V. This review process also provides the LT with individual opportunities for improvement and is used to assess the effectiveness of the LS. The BOD evaluates the CEO's effectiveness with operating the organization in alignment with the V/V.

**1.1a(2)** The LT's actions personally demonstrate the highest standards of ethical behavior by promoting the principles and ideas reflected in the V/V at staff, work system, and department meetings, as well as regularly through RFO conversations. The LT adheres to workplace policies including the Code of Professional Conduct, Donor/Recipient Confidentiality, and Conflict of Interest (COI) with a signed annual disclosure.

Through the LOTS Corporate Compliance Program (CCP; *Figure 1.1-2*), leaders promote an atmosphere that encourages employees and stakeholders to report any questionable behavior. An anonymous hotline reporting system is in place to ensure confidentiality. The entire LOTS workforce, including the LT and BOD, is trained annually on the CCP policy. In addition, compliance policies are reviewed by LOTS Quality staff.

Figure 1.1-1: Leadership System (LS)



#### 1.1b Communication

The LT communicates with and engages the workforce using the Communication Process (*Figure 1.1-3*). As LOTS has grown, the Communication Process has gone through modifications to stay current with organizational needs. Key decisions are disseminated to the entire workforce through various meetings or electronic communications. For example, workforce survey feedback about the monthly staff meetings resulted in a new format, a new schedule, and information-sharing mechanisms that were then shared via the Communication Process (*Figure 1.1-3*). Completion of the Communication Process is accomplished through knowledge sharing and feedback, ensuring a closed communication loop.

To promote frank, two-way communication with employees, the LT uses the Communication Process, which supports an open-door policy, and RFO, the consistent practice of asking specific questions to obtain actionable information. LT members “round” with each of their direct reports to gain knowledge, including the support needed to help the staff member achieve his/her goals, additional resource needs, and peer recognition. This practice is also beneficial in building relationships among leaders and their direct reports and ensuring that communication is effective. To close the communication loop, feedback is provided at staff meetings via the Stoplight Report, which is a report that collects information obtained in rounding and identifies suggestions, actions in progress, or

Figure 1.1-2: Corporate Compliance Program (CCP)

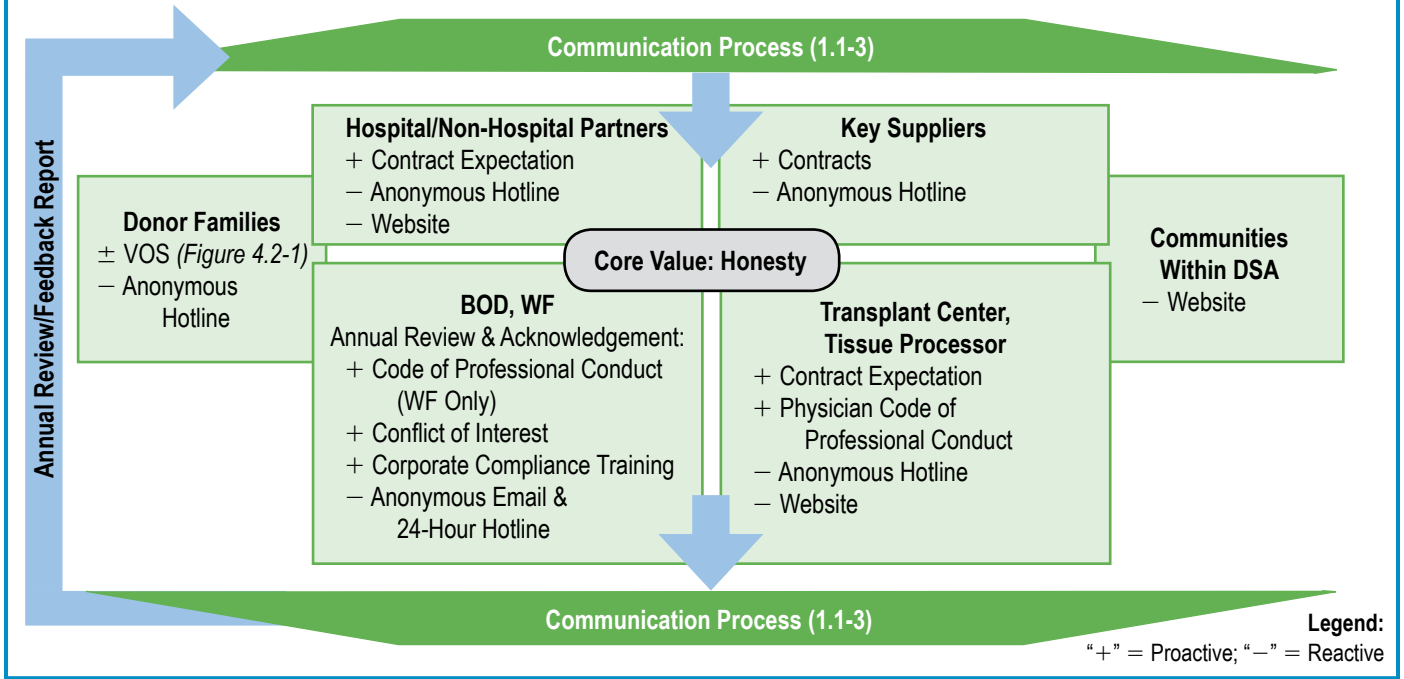
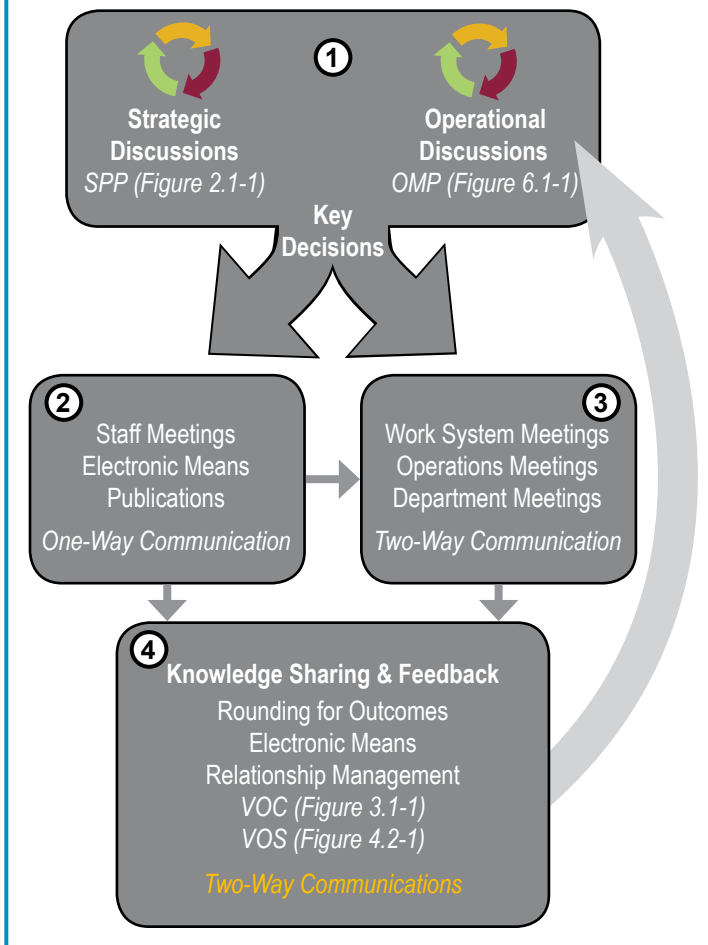


Figure 1.1-3: Communication Process



suggestions not taken. Members of the LT reinforce high performance and a customer and business focus in multiple ways (Figure 5.2-1, Rewards and Recognition). Personal notes of recognition can be written by any member of the LT, including the CEO, to acknowledge special achievement. A customer and business focus and motivation for high performance are also accomplished using the Communication Process (Figure 1.1-3).

Local organ transplant centers and tissue processors are LOTS's key customers. The LT communicates and engages with its customers per the VOC (Figure 3.1-1). Communication with key customers is based on one- and two-way communication and occurs in all phases of the customer life cycle. Due to the confidential nature of donation, social media are not used for operational communication. Social media are used for internal and external communication for broader nonconfidential messaging that does not incorporate donor information. In addition, social media are used to communicate and highlight donor family and recipient stories via Facebook, Instagram, and Twitter, reinforcing the mission of *saving and improving lives*.

### 1.1c Mission and Organizational Performance

**1.1c(1)** The LT creates a successful organization now and in the future through the SPP (Figure 2.1-1) and the LS (Figure 1.1-1), which allow a focus on the organization's planning and key processes to create integrated work systems. To ensure sustainability, processes are mapped and documented, and succession plans are developed; thereby ensuring the environment to accomplish LOTS's life-saving mission. Step 1 of the LS (Figure 1.1-1) ensures that

LOTS is able to create and reinforce an organizational culture that fosters workforce and customer engagement, utilizing the Communication Process (*Figure 1.1-3*) and the VOC Process (*Figure 3.1-1*).

LOTS's strategy is operationalized via the SPP (*Figure 2.1-1*), OMP (*Figure 6.1-1*), and Communication Process (*Figure 1.1-3*). The SPP establishes strategic organizational direction, from which APs are developed, implemented, and modified as needed. The OMP is utilized to review, analyze, improve, and prioritize the organization's internal and external processes; key strategic and operational decisions are communicated to the workforce and key partners via the Communication Process. The organization's performance is monitored by the LT using the PMS (*Figure 4.1-1*); leadership and employee performance is monitored via the PEP (*Figure 5.1-2*). The LOTS culture, the V/M/V, and the LDS (*Figure 5.2-2*) create an environment amenable to employee and organizational learning. The commitment to the mission of *saving and improving lives*, along with the value of improvement, drives LOTS to stay aware of industry knowledge and best practices. Individual training and development goals are addressed through the ongoing PEP. As described in P.1a(2), the LOTS culture encourages an environment where employees continuously seek improvement in order to save and improve more lives.

The LT creates an environment that encourages and supports improvement, and this improvement is measured over time with the key metrics on the Topline Scorecard (*Figure 4.1-2*). If a metric is "in the red" for three months, the responsible leader must analyze and understand why, and if the metric continues below the target, a new or modified AP must be developed to address the shortfall.

LT members, including the CEO, develop succession plans for their positions to ensure that appropriate interim leadership is available should a vacancy occur, as well as plans for future leaders to grow within the organization. Succession plans are aligned with the annual performance evaluations to ensure that current and future leaders are receiving the needed leadership training to support their individual growth and development. A 360-degree feedback review is used to identify specific improvement opportunities for all current leaders. LT development has included training through Learning Development Institutes, attendance at state and national industry conferences, and attendance at nation-wide non-industry conferences.

**1.1c(2)** Through the LS (*Figure 1.1-1*), the LT creates a focus on accomplishing the organization's objectives, improving performance, and achieving the V/M/V. Step 1 of the LS is creating the environment, a key part of the organization's success. This includes using the customer-focused and mission-driven culture to seek continuous improvement. Step 2 of the LS (Operationalize the Strategy) establishes a focus on actions, which are monitored in step 3 (Monitor the Performance). Cascading scorecards, integrated into work systems, departments, and many individual metric levels

and incorporated into the web-based PMS, are a key piece of the PMS and are reviewed at each work system meeting (*Figures 4.1-1 and 4.1-2*). Senior leader accountability for the organization's actions is accomplished through annual goal plans reflected in the PEP (*Figure 5.1-2*). Review of the work system scorecards occurs at the work system meetings and ensures the ability to recognize the need to modify or implement APs as priorities change. AP progress for all departments is reviewed at LT meetings. Systematic reviews of the APs, via one-on-one meetings with managers, provide staff accountability and opportunities to ensure that organizational performance is progressing to plan and that LOTS is ultimately attaining its vision. For example, the Tissue Procurement Department and the PI staff worked collaboratively in 2018 to address "red boxes" for documentation compliance. Several initiatives were created and implemented, resulting in process and procedure improvements that resulted in improved documentation metrics that did achieve target.

Step 1 of the annual SPP helps the organization focus on balancing the needs of customers, partners, and stakeholders. Expectations are validated by periodic surveys and focus groups. Performance metrics in the PMS represent key performance measures of the organization and ensure balance for key customers and stakeholders.

## 1.2 Governance and Societal Contributions

### 1.2a Organizational Governance

**1.2a(1)** Governance of the organization is provided by a 15-member BOD that strategically reviews organizational results to achieve fiscal and management accountability. Transparency in operations ensures that LOTS addresses its responsibility to the community, exhibits ethical behavior, practices good citizenship, and protects stakeholder interests. LOTS's diverse board reflects key customers, stakeholders, and partners and is balanced to promote a diversity of insights and perspectives. Practices of the LOTS's BOD to review and achieve key aspects and accountability of governance include

- Holding management accountable for operational results through evaluation of the monthly Status Report, which shows SO target progress
- Reviewing and approving the strategic plan, budget, Quality Assessment and Performance Improvement (QAPI), and topline metrics annually
- Achieving fiscal accountability by review of financial reports, which are reviewed in detail at board meetings
- Ensuring transparency of the board and committee operations through the availability of minutes, presentations, and reports that include quality/regulatory outcomes. Transparent selection of governance board members is accomplished by actively soliciting nominations from sources including key members of the community and members of the Medical Advisory Board, in addition to nominations from existing BOD members and senior leaders. COI, corporate compliance training, and disclosure statements are signed annually by all board members.

- Maintaining independence and effectiveness in audits through an annual external audit. The audit firm is engaged by the board Audit Committee, which comprises independent board members. Audit results are reported to the committee along with any recommendations.
- Developing and approving a formal succession plan for the CEO. Authority has been delegated by the BOD to the CEO to oversee succession plan development for other ELT members.

**1.2a(2)** A systematic review process is utilized by the BOD's Compensation Committee to conduct an annual review of the CEO's performance. The process inputs include a self-evaluation by the CEO, a review of organizational performance metrics, and an online evaluation of the CEO by the BOD. These inputs are used by the Compensation Committee to develop the CEO's performance review and, in collaboration with the CEO, to set new goals for the upcoming year. The Compensation Committee engages an external consulting firm to conduct a salary survey. In conjunction with the salary survey information, a compensation philosophy and salary range for the CEO are established by the Compensation Committee. Feedback from the BOD and assessment of the committee are utilized to adjust salary based on performance.

The CEO conducts annual performance evaluations for the ELT using the same PEP as is used for evaluations of the LT and the workforce. As part of the PEP process, the CEO provides these leaders with ongoing feedback, including leadership effectiveness and progress towards goal completion in order to drive improvements in performance. The BOD completes self-evaluation surveys biennially to determine the level of performance of board members, as well as to identify opportunities for improvement. The survey includes a self-assessment of their knowledge and comfort levels with key areas of LOTS's operations; this feedback is used to develop an educational agenda targeting their identified development needs (*Figure 7.4-2*). Board survey results help guide BOD meetings and communication.

## 1.2b Legal and Ethical Behavior

**1.2b(1)** To date, LOTS has not been involved with any adverse event that had societal impact on the organization's services and operations. Historically, national industry concerns have focused on the safety of the organs and tissues, coupled with fairness in the allocation of organs to recipients. LOTS proactively approaches these potential threats through strict adherence to policies and procedures. LOTS leverages the Organizational Structure (*Figure 1.2-2*) and utilizes the SPP (*Figure 2.1-1*, Step 2) to gather information from a variety of sources to anticipate legal, regulatory, and community concerns. As an example, the organization engages the greater community through board representation of stakeholder communities on both the governing and advisory boards. Media alerts and position statements created by industry organizations are used in response to national news stories and are distributed to the workforce and BOD as appropriate.

A Crisis Communication Plan has been developed to ensure an appropriate response to public concerns, if needed.

Conservation of natural resources is considered through green building practices, temperature and light conservation, recycling programs, and assurance that the environment is protected through effective biohazardous waste disposal. As an example, multiple efforts are made across the organization to reduce paper usage, including the use of a board portal and screen projection of all meeting data and the transition of several support departments to use paperless systems. LOTS prepares for impacts and concerns proactively through effective supply-network management processes, which include a secure electronic database and established par levels.

Due to LOTS's life-saving mission, all voluntary industry accreditations are sought to help ensure regulatory and legal compliance (*Figure P.1-5*), as well as ethical behavior. These voluntary accreditations help LOTS ensure that processes meet or exceed current standards and assist the organization with proactively identifying any potential opportunities for improving processes. Feedback from these accreditations is incorporated into the organization's PI processes. LOTS has received full accreditation from AOPO and AATB. In addition, LOTS has internal and external audits scheduled across the organization to address regulatory requirements and to identify potential risks associated with its operations, ensuring that the organization remains in a state of readiness.

A series of internal and external audits ensure compliance with key regulatory and legal requirements, as shown in *Figure 1.2-1*. Certain audit findings include a deviation form as part of a formal feedback loop and assist LOTS with proactively addressing issues related to key compliance processes, measures, and goals. Additionally, the audits push the organization to exceed regulatory and legal requirements by serving as methods used for addressing risks associated with key services and operations (*Figures 7.4-4 and 7.4-6*). Audit feedback reports are reviewed by the appropriate work group and summarized for the LT and BOD. Should improvements be identified, a response plan is developed and deployed via the OMP (*Figure 6.1-1*).

**1.2b(2)** The BOD and LT promote an environment that fosters and requires legal and ethical behaviors through the CCP (*Figure 1.1-2*). Furthermore, the organization's ethical behavior standards are reflected in its core value of honesty. To promote and ensure ethical behavior across the organization, all employees adhere to a Code of Professional Conduct.

LOTS's CCP is consistent with industry standards, which provide education, monitoring, and investigation of breaches. The program provides an anonymous mechanism for the workforce and other customers, partners, suppliers, and stakeholders to report any noncompliance events or occurrences. The CCP Officer is responsible for investigating complaints and reporting to the CEO or BOD's Executive Committee, if appropriate. All the elements of the CCP are reviewed annually by the Corporate Governance/Nominating Committee

Key Regulatory and Legal Requirements	Key Risk Reduction Processes	Measures and Indicators	Goals	Figures
Compliance with organ allocation	UNOS/OPTN audits Internal audits	UNOS organ placement policies	Member in good standing	7.4-5
Compliance with FDA requirements	FDA audits	FDA approval	<b>No adverse findings</b>	7.4-5
Voluntary compliance to meet organ donation industry standards	Internal audits QA/Training	AOPO accreditation	Full accreditation	7.4-5
Voluntary compliance to meet tissue donation industry standards	Internal audits QA/Training	AATB	Full accreditation	7.4-5
Compliance with CMS regulations impacting reimbursement	CMS audit Internal audit	<b>CMS certification</b>	<b>Full certification</b>	7.4-5
Compliance with IRS regulations impacting not-for-profit organizations	External Financial audits	Minimal audit adjustments	<b>Unqualified opinion</b>	7.4-4
	Corporate Compliance Process (CCP)	Annual training acknowledgement Reported hotline issues	100% Completion No Events	AOS
Compliance with regulations impacting Human Resources	EEOC guidelines	Policy Compliance	No events or occurrences	7.4-6
	FLSA posted	Posting		
Safe work place	<b>Safety officer</b> Safety committee Employee training	OSHA site audits	Full compliance	7.4-5
		Reportable events	No reportable events	7.3-7
Compliance with DOR requirements	DOR audit	DOR approval	<b>No adverse findings</b>	7.4-5

Level	Roles	Outcomes
① <b>BOD</b>	<ul style="list-style-type: none"> <li>Validate V/M/V</li> <li>Establish accountability</li> </ul>	<ul style="list-style-type: none"> <li>Long-term strategic direction</li> <li>Organizational sustainability</li> </ul>
② <b>Leadership Team (ELT and LT)</b>	<ul style="list-style-type: none"> <li>Create the environment</li> <li>Operationalize the strategy</li> <li>Monitor the performance</li> </ul>	<ul style="list-style-type: none"> <li>Organizational culture</li> <li>Strategic plan deployment</li> <li>People &amp; performance management</li> </ul>
③ <b>Workforce</b>	<ul style="list-style-type: none"> <li>Support and facilitate organ &amp; tissue donation</li> </ul>	<ul style="list-style-type: none"> <li>Maximize donation</li> </ul>

### 1.2c Societal Contributions

**1.2c(1)** The accomplishment of the mission—we save and improve lives—is LOTS’s greatest gift and contribution to

society. This can be measured by the increase in the number of organs transplanted and the reduction of deaths on the local transplant waiting list, as well as the increasing number of tissue transplants (*Figures 7.1-3 through 7.1-14*). Step 1 of the annual SPP session includes a discussion of key communities to ensure that the organization is responsive to their needs and requirements (*Figure 2.1-1*).

Through the design of its facility, which includes an energy management system, LOTS contributes to environmental well-being. The organization continues to explore “green” opportunities suggested by the workforce; previous staff suggestions resulted in a formalized recycling program for paper, plastic, and aluminum, as well as a reduction in hand-outs for stakeholders by providing data electronically.

**1.2c(2)** The BOD identifies LOTS’s key communities, and the LT reviews and validates them annually as part of the SPP (*Figure 2.1-1*). LOTS’s key communities include donor families, transplant recipients, and their families within the DSA. LOTS supports and strengthens key communities in multiple ways. To support donor families, LOTS constructed a Donor Memorial Monument and park for donor and recipient families to gather, remember, and honor their loved ones. In addition, more formal ways to honor a donor family’s loved one are memorial events in which staff members actively participate at events hosted across the organization’s DSA.

## Category 2: Strategy

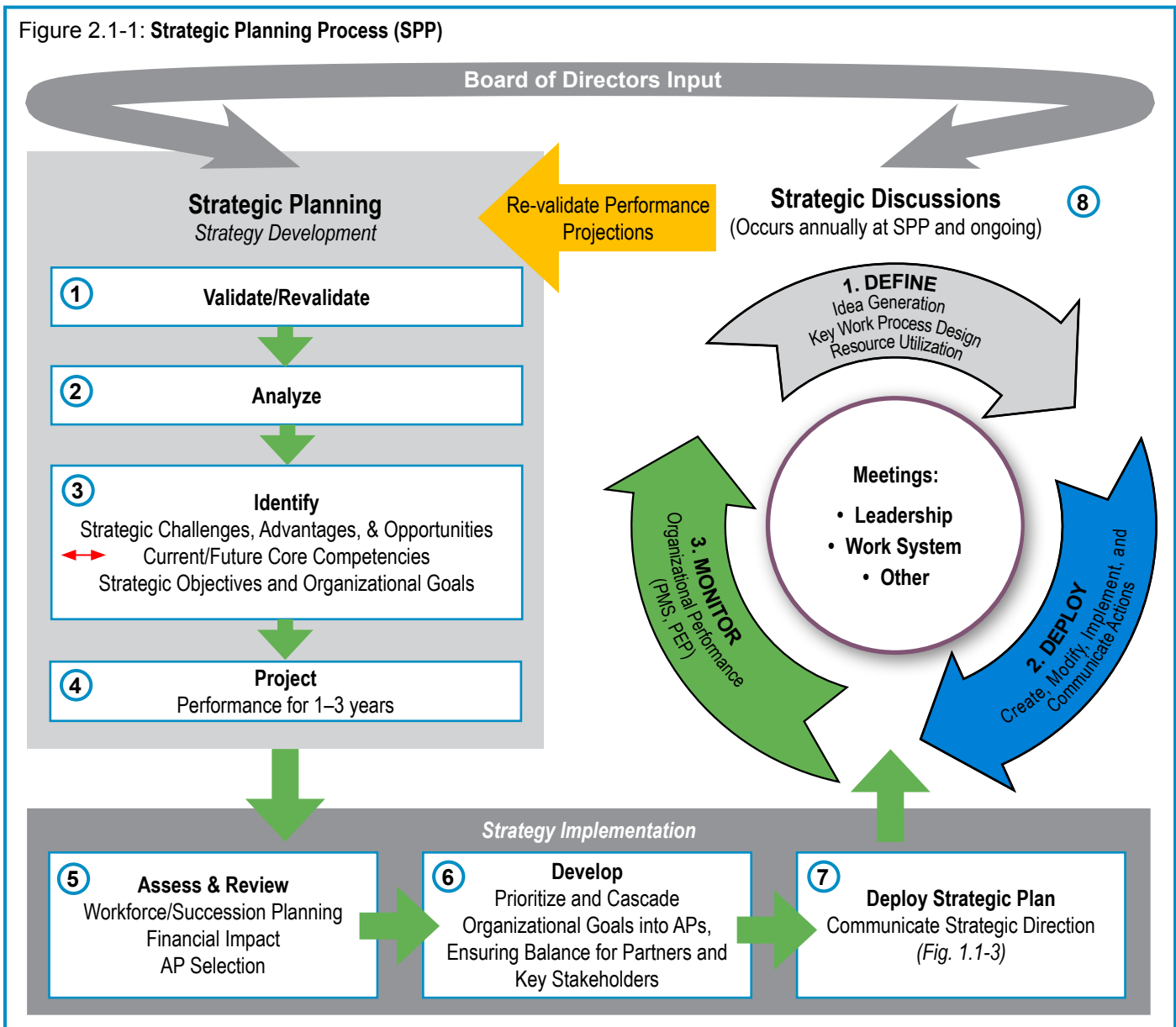
### 2.1 Strategy Development

#### 2.1a Strategy Development Process

**2.1a(1)** Through cycles of learning, the focus of strategic planning evolved from a process based on defining and approving actions to support the budget, to the systematic SPP occurring throughout the year, supported by APs and goal achievement. The OPO business ecosystem is one that requires LOTS to be agile to ensure its ability to meet customer and, ultimately, recipient needs. The SPP involves strategic development, implementation, and discussions, each of which consists of multiple steps (*Figure 2.1-1*). Currently, participants in the SPP include the LT, BOD members, customers, front-line staff, key partners, and key suppliers.

Both the BOD and LT focus on a strategic time frame; short-term targets and objectives are to be met in one year, and long-term targets and objectives are set for two years. In step 4 of the SPP, focused strategic discussions address the performance projections for the one- and two-year time horizons established for key metrics.

Any changes and/or prioritization of change or improvement initiatives are identified and evaluated within the SPP (*Figure 2.1-1*). LOTS capitalizes on its agility achieved through the Organizational Structure (*Figure 1.2-2*) to utilize a continuous SPP (*Figure 2.1-1*), which has seen learning and improvements. The LT participates in strategic discussions (SDs) that take place during leadership and work system meetings, creating consistency across the SPP. During these SDs,



APs may be created, modified, and deployed as needed, and the progress-to-plan is monitored and evaluated, ensuring agility and operational flexibility. This ongoing cycle of strategy development and deployment has created a strategic LT that fosters an environment for action and continuous improvement to support LOTS's life-saving mission. The SPP undergoes an annual review to ensure that all elements are addressed and that the methods utilized remain agile, flexible, and effective in responding to changes in the donation environment.

**2.1a(2)** The commitment to the mission of *saving and improving lives*, along with the value of improvement, drives LOTS to stay on the top of industry knowledge and best practices. Operational improvements are identified and implemented through the SPP and the OMP (*Figure 6.1-1*). As part of the improvement approach, improvement suggestions and ideas are identified through multiple inputs and then vetted through the LT and a PDSA cycle. This might include the utilization of improvement teams, comprising multidisciplinary and diverse departments and staff. The teams perform data review, and, using PI tools including PDSA, they complete brainstorming and prioritization sessions. The improvement system has undergone several cycles of learning to ensure that all parts of the PDSA system are identified and acted on.

The SWOT (Strengths, Weaknesses, Opportunities, and Threats) list is reviewed during the SPP (Step 2) and validated through ongoing SDs (Step 8). Strategic opportunities are identified in step 3 of the SPP and during ongoing SDs that promote "out-of-the-box" thinking. For the 2018 planning cycle, the key strategic opportunities identified are registry enrollment and customer satisfaction.

**2.1a(3)** During step 2 (Analyze) of the SPP, LOTS evaluates its strategic position. This step also includes review of key performance measurement results and an environmental scan of the donation and transplantation industry, as well as the overall health care climate of the community. The review includes

- Key performance measurement results (*Figure 4.1-1*)
- SWOT; SCs and SAs (*Figure P.2-1*)
- BOD input (*Figure 1.2-2*)
- Customer, donor family (collaborator), and other key stakeholder feedback and preferences (*Figure 4.2-1*)
- Current and proposed changes to regulatory requirements (*Figure 1.2-1*)

Following analysis of the present situation, which includes a review of historical data, step 4 involves the completion of a performance projection exercise to effectively forecast activity levels for key organizational metrics for the next two years.

During step 3 (Identify) of the annual SPP, LOTS collects and analyzes relevant data to assist in the identification or validation of the SCs and SAs, using information gleaned from step 2. This process validates the SOs and establishes the appropriate goals critical to the future success of the organization. Potential blind spots that limit goal achievement or the accomplishment of the organization's SOs are identified in step 2 of the SPP during the environmental scan with key

customers. An example of learning and improvement is that LOTS added the expansion of formal input from key partners to include additional relevant industry data gathered from customer and partner organizations and provided in presentations to the LT. These data may be collected from industry or nonindustry organizational conferences (AATB, AOPO, etc.).

During step 6 (Develop), LOTS cascades organizational goals into APs to accomplish the SOs, address the SCs, and make a final determination about the feasibility of accomplishing the SOs during the desired time frame. Throughout the year, SDs include a review of relevant changes impacting the organization's ability to execute the strategic plan. The LOTS's strategic plan is fluid and provides review at many levels, thereby providing the organization the agility necessary to be able to modify previous strategies as needed. This constant evaluation, monitored by the PMS (*Figure 4.1-1*) and facilitated by the Communication Process (*Figure 1.1-3*), keeps the organization focused on executing the strategic plan with suitable flexibility. Organizational results are linked to the SPP (*Figure 2.1-1*, Step 2), and if AP results are not on target per the PMS, action is taken to address the gap.

**2.1a(4)** The decision to outsource a process or to manage it internally is initiated through the SPP and includes assessment of many factors including core competencies, business ecosystem changes, and changes in regulation. Ongoing analysis of key supplier and partner expertise and/or skill sets via the OMP provides key information to aid in the determination of which key processes will be accomplished internally or externally. For example, LOTS tested a business case study to bring laboratory testing within the organization. After reviewing the internal skill set and financial commitment required, LOTS decided to continue to partner with the Columbia University Hospital's laboratory to perform all infectious disease testing and Human Leukocyte Antigen (HLA) typing. This allows LOTS to focus on saving and improving lives.

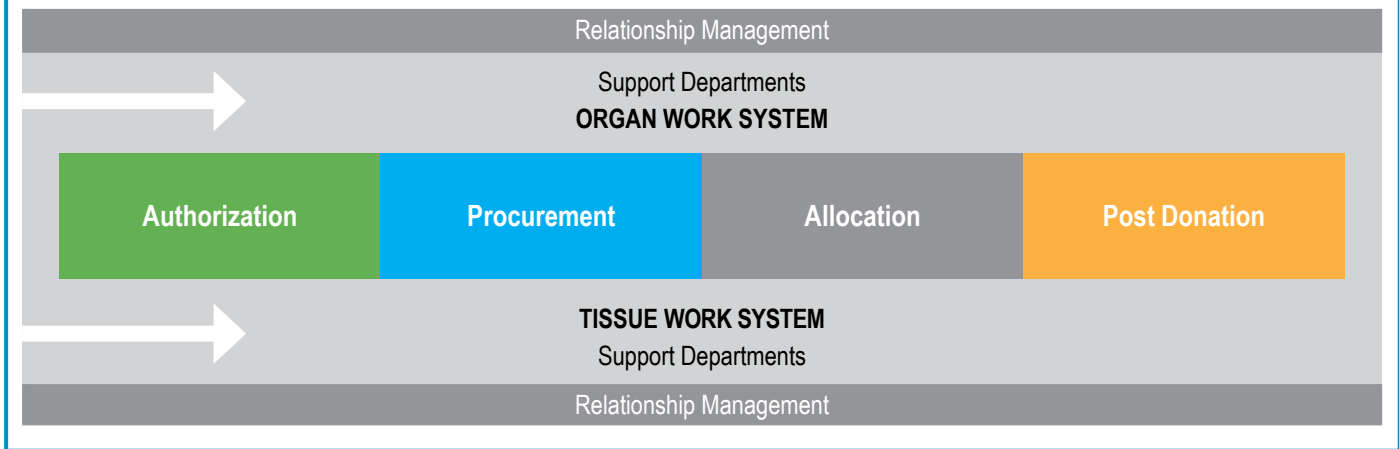
The key work systems are the OWS and the TWS (*Figure 2.1-2*). Work system decisions are made via step 8 of the SPP. Incorporation of organizational knowledge, new technology, product excellence, and agility are also accomplished through the OMP (*Figure 6.1-1*). Within step 3 of the SPP, LOTS defines and validates its SAs, SCs, SOs, current and future CCs, and organizational goals based on current performance and the environmental scanning analysis completed in step 2. All CCs are assessed to ensure that they are based on a strategic assessment of measurable attributes (7.4b).

## 2.1b Strategic Objectives

**2.1b(1)** Critical to LOTS's sustainability are the two strategic objectives that are most critical to saving lives: maximize donors and maximize stakeholder relationships. Performance projections reflecting efforts to accomplish the SOs are established in step 4 of the SPP and are highlighted in *Figure 2.1-3*.

LOTS has minimal planned changes with customers, markets, suppliers, and partners.

Figure 2.1-2: Work System Alignment



**2.1b(2)** The SOs are complementary by nature to ensure appropriate balance for organizational needs. The SO of maximizing stakeholder relationships helps create a focus on driving customer and stakeholder satisfaction. The culture also empowers the mission-driven workforce (CC) to maximize donation to achieve the SO of increasing organ and tissue donors. LOTS supports its SOs with organizational goals and resulting APs that leverage its SAs and CC while tackling its SCs (Figure 2.1-1, Steps 4 and 5) and strategic opportunities.

As part of the SPP, ongoing SDs based on information from the PMS (Figure 4.1-1) provide LOTS with an opportunity to balance short- and long-term challenges within an evolving industry to ensure adaptability to sudden shifts. The organization’s SOs consider and balance the needs of stakeholders by leveraging the organizational structure, work system design, and goal prioritization in step 6 of the SPP (Figure 2.1-1).

## 2.2 Strategy Implementation

### 2.2a Action Plan Development and Deployment

**2.2a(1)** AP development begins in SDs through the SPP and is a cooperative effort between the LT and employees. Through learning and improvement, the organization has moved from a reactive nature where the LT pushed APs to the staff following the SPP, to a proactive nature where the LT solicits staff participation in SDs to provide input into establishing APs, thus ensuring workforce ownership. Figure 2.1-3 outlines several of the key short- and long-term organizational goals that are cascaded to the workforce. Some goals are complex enough to warrant multiple APs, while others are maintained through current business practices and therefore do not require additional APs.

**2.2a(2)** Strategy and AP deployment to the workforce, suppliers, and partners occur in step 7 of the SPP and through the Communication Process (Figure 1.1-3). LOTS sustains key

Figure 2.1-3: Strategic Linkages

SO	Organizational Goals	2018 (Actual)	2019* 1-year (short-term)	2020* 2-year (long-term)	Strategic Challenges/ Advantages (SC/SA)	Results
Maximize Donors OWS	Achieve Organ Donors at 110	102	110	120	SC	7.1-3
	Achieve Organs Transplanted at 360	352	375	400	SC	7.1-5
	Achieve Total Bone Donors Released at 750	755	800	850	SC	7.1-6
Optimize Stakeholder Relationships TWS	Sustain Transplant Center Satisfaction	4.81	>4.5	>4.5	SA	7.2-1
	Sustain Tissue Processor Satisfaction	4.8	>4.5	>4.5	SA	7.2-2
	Staff Retention Rate	70%	75%	80%	SC	7.3-13

\*Complete list of APs AOS



outcomes of APs through tracking and monitoring via a web-based program that aligns goals with individual performance for all members of the workforce towards the accomplishment of organizational goals, APs, and aligned SOs. The status of APs is reviewed by members of the LT and staff during routine one-to-one meetings and in-depth at the LT meetings. This allows for strategy shifts and resource re-allocation and ensures that the outcomes of APs can be sustained. Key outcomes of the APs are monitored through review of the PMS. In addition, modeling industry best practices in both the OWS and TWS, benchmarking organizational results to industry high performers, and having a mission-driven workforce (CC) further define the roadmap for LOTS to accomplish its SOs.

**2.2a(3)** During step 5 of the SPP, APs are reviewed in detail to ensure alignment with the organization's SOs and resource availability. Workforce planning (Step 5) includes a summary of the capability and capacity (C&C) discussions, which prompt the identification of adequate capacity and the key learning and development resources needed to drive the accomplishment of APs. Through a detailed budgeting process, a monthly departmental financial trend analysis, and a forecast of financial risk (including an assessment of the financial impact of the APs and organizational goals), LOTS ensures that adequate financial resources are available to support ongoing operations and newly developed APs. Members of the LT participate in the process of budget creation and review; the budget is initially approved by the CEO, with final approval by the BOD.

In step 8 (SDs—ongoing) of the SPP, financial risk and viability are assessed for current operations and obligations. Financial results are affected by allocation of costs through the CMS cost report. A financial statement is prepared monthly for the LT and BOD. Year-to-date financials are also presented at BOD meetings. Risk assessment includes cost modeling the potential effects of actions via financial statements, cash flow projections, and return on investment (ROI) calculations.

**2.2a(4)** Workforce plans are captured within step 5 (Assess) of the annual SPP and in the Workforce Planning Process (*Figure 5.1-1*). As a part of these processes, the LT performs an analysis of current and future needs and reviews capacity and capability information along with onboarding and stay and exit interview data. These discussions determine the potential impact on the workforce, as well as workforce needs for the accomplishment of the short- and long-term APs. Management one-to-one meetings, RFO, and C&C discussions with management representation from every department provide LOTS with the ability to review increasing C&C needs, as well as any potential changes that could impact the workforce. These ongoing SDs and operational discussions (ODs) aid in addressing training and development needs related to workforce capability, while assessing the potential need for modification in the workforce should demands change.

**2.2a(5)** Key performance measures for tracking the achievement of APs and associated organizational goals that support the SOs are included in the PMS outputs (*Figure 4.1-1*). Tracking the effectiveness of APs is further accomplished through AP status reviews at LT meetings. AP status is also reviewed by managers in their respective one-to-one meetings with their direct managers and with their staff members during RFO. To promote transparency of the ongoing assessment of organizational performance, APs are updated regularly and are housed on a web-based program accessible to all members of the workforce. The prior year's APs are assessed for completion and effectiveness and are summarized in a Q1 LT meeting. Through ongoing SDs, the LT ensures that the measurement system (*Figure 4.1-1*) covers all key areas of deployment and stakeholder requirements. The APs are ultimately measured by topline organizational performance. Topline measures cascade throughout departments to an individual's PEP via APs to reinforce alignment and the accountability necessary to accomplish the mission of LOTS (*Figure 4.1-2*).

**2.2a(6)** Initial projections are established during step 4 of the SPP, modified through the budgeting process, and re-validated with end-of-the-year outcomes. Past, present, and projected performance outcomes and benchmarks are reviewed through the PMS. After the review, the LT establishes one-, two-, and three-year projections through traditional trending analysis. This assists in the identification of performance gaps, aids in goal-setting, and is critical given the limited number of public data sources. If gaps in performance are identified, SDs occur, PI tools are utilized, APs are created or modified, and resources are allocated to address the opportunities.

## 2.2b Action Plan Modification

Systematic reviews occurring during work system meetings, LT meetings, and ongoing SDs (*Figure 2.1-1*, Step 8) provide the opportunity to identify performance measures that are lagging and to modify existing APs or create new ones as needed. Scorecard measures lagging over a three-month period initiate a "red-box" discussion with the associated LT members and a member from PI. A data analysis and subsequent AP deployment, or AP modification for improvement, may be performed, depending on the outcome of the analysis. Deployment of APs and modified APs are accomplished through actions that cascade from the work system or department level and may cascade down to the individual level. Ongoing monitoring and discussion of the APs occur through LT meetings, the PEP, staff RFO, and work system meetings. Modifications to APs are tracked and discussed during LT meetings to ensure that the decision-making process is communicated. The ability to effectively track APs and their modifications enables the organization to allocate resources effectively.

## Category 3: Customers

### 3.1 Customer Expectations

#### 3.1a Customer Listening

**3.1a(1)** LOTS uses multiple formal and informal mechanisms to collect, transfer, and use customer information to identify opportunities for improvement and innovation. This VOC Process (*Figure 3.1-1*) incorporates methods for listening, interacting, and observing local organ transplant centers and tissue processors to obtain actionable information throughout the Customer Life Cycle (*Figure 3.2-1*). The various listening and learning methods used for each customer group, as well

as methods for listening for each phase in the customer life cycle, are noted in the VOC Process; listening and learning methods are the same for both customer groups. Learning and strategic improvements have led to a Customer Survey Process (AOS) that incorporates feedback reports and provides results to the survey participants and the development of any associated APs. LOTS is able to respond to feedback from the Customer Survey Process through immediate actions via SDs and the SPP, as illustrated in the Communication Process (*Figure 1.1-3*). The primary methodology used by LOTS to

Figure 3.1-1: Voice of the Customer (VOC)

Method		Frequency	Life Cycle Phase				Customers	
		M = Monthly O = Ongoing A = Annual Q = Quarterly SA = Semi-Annual	Pre-Donation	Donation		Post-Donation	Local Organ Transplant Centers	Tissue Processors
				Procurement	Allocation			
Collect (Figure 4.1-1)	Operational Discussions	O	•	•	•	•	↔	↔
	Day-to-Day Work/Interactions/Department Meetings	O	•	•	•	•	↔	↔
	Participation in SPP ( <i>Figure 2.1-1</i> )	O	•	•	•	•	↔	↔
	Board of Directors	Q	•	•	•	•	↔	
	Medical Advisory Board	SA		•	•		↔	
	Transplant Center Meetings	SA		•	•	•	↔	
	Surveys	O	•	•	•	•	←	↔
	Audits, Internal/External	O	•	•	•	•	←	←
	Social and Electronic Media	O	•	•	•	•	↔	↔
	<i>Figure 1.1-2 Corporate Compliance Program</i>	O	•	•	•	•	←	←
	Events/Candlelight Memorial/Open House/Receptions	O	•	•	•	•	↔	↔
CAPA/Deviations	O	•	•	•	•	←	←	
Transfer (Figure 1.1-3)	Best-Practice Sharing	O	•	•	•	•	↔	↔
	Scorecards/Status Reports/Metrics On-Demand	O	•	•	•	•	→	↔
	Meetings, Scheduled and Ad Hoc	O	•	•	•	•	↔	↔
	Survey/Processor Feedback	O	•	•	•	•	→	↔
	Social and Electronic Media (e.g., EMR, Facebook, Website, DonorNet)	O	•	•	•	•	↔	↔
Utilize	<i>Figure 2.1-1 SPP</i>	O	•	•	•	•	↔	↔
	Survey Feedback/Baldrige Feedback/Annual Report	A	•	•	•	•	→	↔
	CAPA/Deviations	O	•	•	•	•	→	→
	<i>Figure 1.1-2 Corporate Compliance Program</i>	O	•	•	•	•	→	→
	Audit Findings	O	•	•	•	•	→	→
Best-Practice Sharing	O	•	•	•	•	↔	↔	

Legend: ↔ = 2-way communication; ← and → = 1-way communication, in and out, respectively

obtain customer feedback is the online survey. LOTS has an established website and social media presence on Facebook, Vimeo, Twitter, and Instagram. Given the highly regulated nature of the donation and transplant industry, there is no sharing of confidential information across social media sites. LOTS focuses social media efforts on communication strategies that strengthen the organization's brand, reinforce company culture, and celebrate stakeholder successes.

LOTS seeks actionable feedback on the quality of services and customer support via VOC listening and learning methods, including surveys, formal and informal interactions, and meetings (*Figure 3.1-1*). Learning is transferred via multiple communication mechanisms through the Communication Process (*Figure 1.1-3*).

**3.1a(2)** As the federally designated OPO within its service area, LOTS does not have traditional organ procurement competitors or potential customers. Transplant centers exist within the OPO's DSA, and organs are allocated according to UNOS/OPTN through two-way communication. LOTS keeps abreast of potential changes in organ transplant center status utilizing the Communication Process (*Figure 1.1-3*) and VOC (*Figure 3.1-1*). The restriction of operating within a federally designated territory eliminates competition and encourages collaborative efforts among OPOs.

Relationship management within the small, established tissue industry allows for contact with potential, future, and competitor customers. Listening and interactions occur regularly with potential and former customers via industry conferences and webinars, as well as through survey data, as applicable (*Figure 3.1-1*). These mechanisms allow LOTS to obtain actionable information on its services, customer support, and transactions. For example, two additional tissue processor customers were added in 2017 as a result of prior effective relationship management and changes in the tissue marketplace.

Knowledge sharing and benchmarking with other OPOs for both service lines allow for the identification of gaps among LOTS and high-performing peers. Using feedback on the services provided by other OPOs serves as indirect feedback on the level of services provided by LOTS. This information supports operational and strategic decision making and innovation (4.1a[2]).

### 3.1b Customer Segmentation and Product Offerings

**3.1b(1)** The SPP (*Figure 2.1-1*) coordinates information leveraged through multiple process inputs to validate current customer and anticipate future customer groups and market segments. Information gathered from the VOC (*Figure 3.1-1*) is also used to identify and anticipate market segments.

Information gathered through the PMS, including the VOC data, is integrated within the SPP. Knowledge sharing and benchmarking for both service lines aid in the identification of gaps (*Figure 4.1-4*). This actionable information supports operational and strategic decision making for both work

systems. Information collected in the VOC, along with the analysis completed in the PMS, is used to assess potential business growth opportunities. The OMP is used to determine which customer groups to emphasize for business growth.

**3.1b(2)** LOTS relies upon its VOC (*Figure 3.1-1*) to determine customer needs and requirements for organ and tissue donation services (*Figure P.1-6*). Customer requirements are solicited through LOTS's formal Customer Survey Process (AOS), and results are validated during the SPP (*Figure 2.1-1*). These requirements serve as critical inputs for the design of work processes and identification of opportunities for improvement. LOTS focuses on process improvement efforts to consistently meet and exceed customer needs and expectations.

LOTS focuses on Finding the Heroes (*Figure P.1-3*) and maximizing each donation opportunity to its fullest potential to meet the needs of its customers. Formal and informal VOC mechanisms ensure that revised regulations and opportunities are captured in ODs and SDs, providing organizational agility to incorporate applicable changes in meeting and exceeding customer needs and expectations.

Leveraging the robust Communication Process (*Figure 1.1-3*) and working with its customers to identify service improvements and refinements, LOTS uses the VOC, PMS, and SPP as inputs into the OMP (*Figure 6.1-1*).

For the OWS, service offerings in new markets are not possible due to the assigned DSA. TWS new-customer opportunities, expansion of relationships with current customers, or new service offerings are identified via the SPP or the VOC Process. LOTS's commitment to improvement differentiates its services and creates opportunities to expand and deepen relationships with current customers.

## 3.2 Customer Engagement

### 3.2a Customer Relationships and Support

**3.2a(1)** LOTS's mission-driven workforce (CC) develops and manages customer relationships as outlined in the VOC (*Figure 3.1-1*). Information is collected from customers and transferred into the SPP and ongoing SDs, where trending, analysis, and validation take place. Validated information is utilized to improve the level of service provided to current customers. LOTS leverages its brand, reputation, and performance to acquire tissue processor customers and build market share. Surveys assessing customer satisfaction show that LOTS is working to perform at levels to ensure that processor satisfaction is met or exceeded. For example, Advantage Life, a former tissue processor, contacted LOTS in 2018 to resume providing tissue donors based on LOTS's prior performance and effective relationship management.

The provision of exceptional service allows LOTS to retain customers while meeting their requirements, exceeding their expectations, and increasing their engagement in every stage of the customer life cycle. The Customer Survey Process

includes assessments to drive improvements in both satisfaction and engagement.

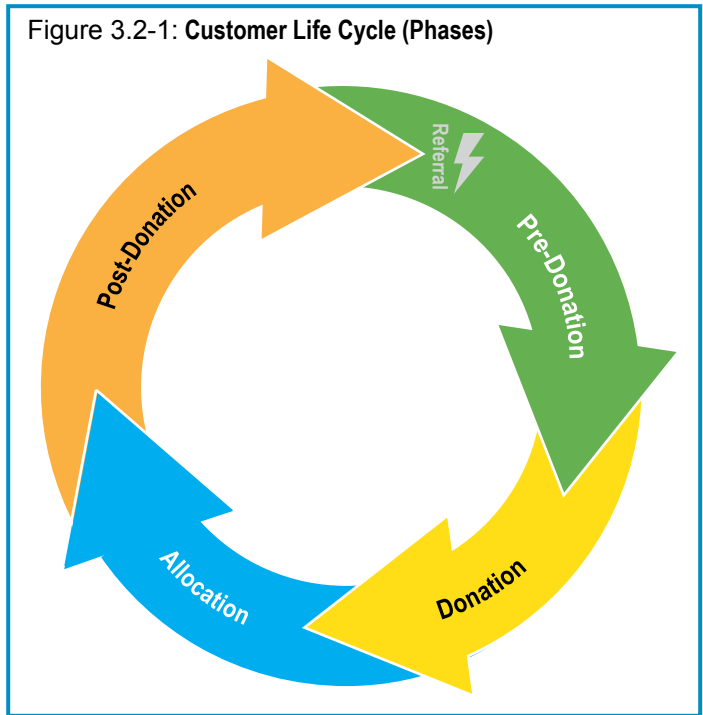
LOTS uses data and information gathered through social media to help enhance the organization’s brand by raising awareness of donation and transplantation and, ultimately, driving its vision of *organs and tissues are always available*. As a supplement to the environmental scanning analysis performed during step 2 of the SPP (*Figure 2.1-1*), LOTS follows the social media postings of its customers and key stakeholders to ensure access to the latest developments and to celebrate customer and partner successes. Moreover, the organization follows appropriate industry news sources to identify trending stories or ones gaining in media exposure, to generate talking points, and to create prepared responses, as necessary. This includes social media alerts for several key words such as organ and/or tissue donation and transplant. This additional insight may assist in the identification of new service lines and market segments, including 3D organ printing and new processing partners. In addition to environmental scanning and crisis communication, LOTS supplements organizational strategies to increase share rates and followers to its own social media outlets through the identification and sharing of value-added content.

**3.2a(2)** Local organ transplant centers and tissue processors are empowered to seek information and support throughout the Customer Life Cycle (*Figure 3.2-1*), as illustrated in the VOC Process (*Figure 3.1-1*). Customers are able to conduct business with LOTS via inputs as listed in the VOC and by leveraging the Communication Process (*Figure 1.1-3*).

The key means of customer support in both work systems is the fulfillment of customer requirements (*Figure P.1-6*). Key communication mechanisms, including email, 24/7 phone contact, and website accessibility, enable customers to seek information, receive support, and conduct business. Methods of customer support do not vary between customers, customer groups, or market segments.

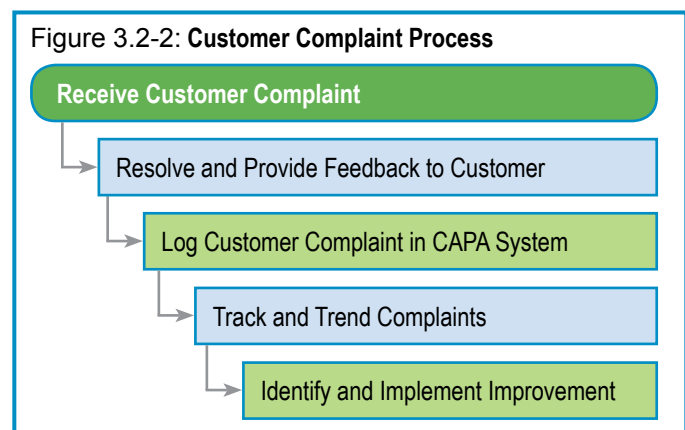
Key customer support requirements are determined through the VOC, validated through the Customer Survey Process (AOS), and deployed to all people and processes involved in customer support via the Communication Process. The Customer Survey Process has undergone learning and cycles of improvement.

**3.2a(3)** The LOTS mission-driven workforce (CC) is dedicated to complaint resolution, resulting in high levels of customer satisfaction (*Figures 7.2-1 A-C; 7.2-2; and 7.2-2A-D*). As the initial step in the Customer Complaint Process (*Figure 3.2-2*), all staff members are trained in service recovery. Front-line staff members are empowered to implement immediate corrective action at the point of service and use additional resources if needed to quickly resolve customer



complaints. This process allows the LOTS workforce to follow up and provide real-time feedback to successfully resolve the complaint. Complaint trends continue to be low (*Figures 7.2-3 and 7.2-3A-B*). If front-line staff members or managers are not able to resolve the complaint to satisfy the customer, the complaint is elevated to the ELT for resolution.

Local organ transplant center or tissue processor complaints or policy/procedure deviations are routed through the corrective action preventive action (CAPA) system for tracking and identifying root causes of the deviations. Trend analysis of customer complaints is presented at OWS/TWS meetings and quarterly at LT meetings, and it is incorporated into the SPP for process improvements. This allows the organization to avoid similar complaints in the future.



### 3.2b Determination of Customer Satisfaction and Engagement

**3.2b(1)** Local organ transplant center and tissue processor satisfaction is determined through formal survey results (*Figures 7.2-1A-C; 7.2-2; and 7.2-2A-D*) and personal communication and interaction with members of the LOTS workforce (*Figure 3.1-1*). The methods to determine customer satisfaction are the same for all service lines. Survey data are segmented by multiple dimensions, including by customer group or market segment, the level of service quality received, and customer requirements. Customer satisfaction data are analyzed and shared via the Communication Process (*Figure 1.1-3*) through SDs at TWS/OWS meetings, and the findings are incorporated into the SPP (*Figure 2.1-1*, Steps 2 and 8).

LOTS uses multiple methods, including surveys, to capture customer dissatisfaction as shown in the VOC (*Figure 3.1-1*). Local organ transplant center and tissue processor feedback is shared via the Communication Process with LOTS staff and other stakeholders and customers. It is also reviewed as part of the SPP (*Figure 2.1-1*) and SDs occurring at work system meetings to ensure actionable feedback and process improvements. A Deviation and Complaint Process is part of the CAPA system. Dissatisfaction data are trended through the CAPA system using collected deviation and/or complaint reports. This results in the identification of root causes and actionable items. The implementation of the Feedback Process creates the framework for analysis based on the services provided at certain intervals in the Customer Life Cycle (*Figure 3.2-1*) as it relates to customer requirements.

LOTS measures customer engagement based on the theory that relationship strength is correlated with customer loyalty, and that loyalty is obtained via those customers that are highly satisfied. Customer satisfaction—or “engagement”—at the highest level is determined via “top-box” scores—or scores of 5 on a survey measuring satisfaction on a scale from 1 to 5.

The PMS (*Figure 4.1-1*) is used to define and collect key performance indicators from both work systems. These data are

transferred back into these processes in the form of actionable information via the Communication Process, where the data can be used to deliver improvements to meet and exceed customers’ expectations, thereby securing customer engagement for the long term. For example, processor satisfaction with the Donor Screening Process was identified as a low-scoring metric on a 2016 survey. Discussions in the OMP led to the development and implementation of APs in 2017 and 2018 to address the gap, resulting in changes in the way information was provided at screening. Scores for processor overall satisfaction with donor screening, and with the information provided at screening, were higher in 2017 and 2018.

**3.2b(2)** Due to designation of its service area by CMS, LOTS does not have customer competitors in the OWS. In the TWS, LOTS collaborates to obtain industry benchmarks on customer satisfaction from other OPOs (*Figure 4.1-4*). Processors provide metrics using industry comparisons, which provide information on key tissue metrics.

### 3.2c Use of Voice-of-the-Customer and Market Data

LOTS selects and collects VOC data through multiple listening, interaction, and observation methods as indicated in VOC (*Figure 3.1-1*). VOC data are integrated into the PMS, which drives operational and strategic decision making through the OMP and SPP, ensuring that a customer-focused culture exists in the organization. Data are segmented by multiple dimensions, including customer group or market segment, the level of service quality received, customer requirements, and the phase of the customer life cycle. VOC data are analyzed and shared via the Communication Process (*Figure 1.1-3*) through SDs and at work system meetings. APs to bridge gaps in performance and minimize complaints are deployed to appropriate members of the workforce (3.1b[1]) as an output of the Customer Survey Process (AOS). LOTS uses data and information gathered through social media to help enhance the organization’s brand by raising awareness of donation and transplantation and, ultimately, driving its vision *of organs and tissues are always available*.

## Category 4: Measurement, Analysis, and Knowledge Management

### 4.1 Measurement, Analysis, and Improvement of Organizational Performance

#### 4.1a Performance Measurement

**4.1a(1)** LOTS uses the PMS (*Figure 4.1-1*), which has undergone a cycle of learning, to monitor all key business and daily operational processes. Key performance measures are selected, collected, aligned, and integrated in the SPP (*Figure 2.1-1*). The SPP is the mechanism that the organization uses to select its SOs and to develop goals supported by aligned APs. To accomplish its mission, LOTS uses the data and information collected from the PMS as inputs into the key decision-making processes, SPP, and OMP (*Figure 6.1-1*). Central to the PMS is an electronic system of cascading scorecards (*Figure 5.1-4*) starting with the Topline Scorecard (*Figure 4.1-2*), which has the capability to drill down through work system- and department-level scorecards. Information is readily available to assist in tracking daily operations through the Data Mall, a central repository for the PMS that is available to the workforce 24/7 through the LOTS intranet.

Performance measures are used to support organizational decision making through their aggregation and integration into the

cascading scorecard system and the PEP (*Figure 5.1-2*). AP progress is tracked using a web-based performance measurement system, and APs are reviewed at LT meetings and individually during RFO. Scorecards use a series of targets (defined as goals) to measure organizational performance and projections, which are defined as annualized calculations based on year-to-date and/or actual performance in achieving the SOs. Targets facilitate the determination of the appropriate color-coding for all metrics, allowing real-time evaluation and tracking of progress of the organization's performance. The Communication Process (*Figure 1.1-3*) deploys and integrates this information across the organization. The LT and workforce are able to navigate the color-coded scorecard to enhance decision-making effectiveness and support continuous improvement. Once PI staff members populate and validate the organization's scorecards, they may notify the appropriate manager to set up a meeting to analyze the data and develop an AP or modified AP if metrics falling short of the target have been identified. The key organizational performance measures are tracked monthly and found in the Topline Scorecard (*Figure 4.1-2*). Key Financial Measures (*Figure 4.1-3*) are both short- and long-term.

Figure 4.1-1: Performance Measurement System (PMS)

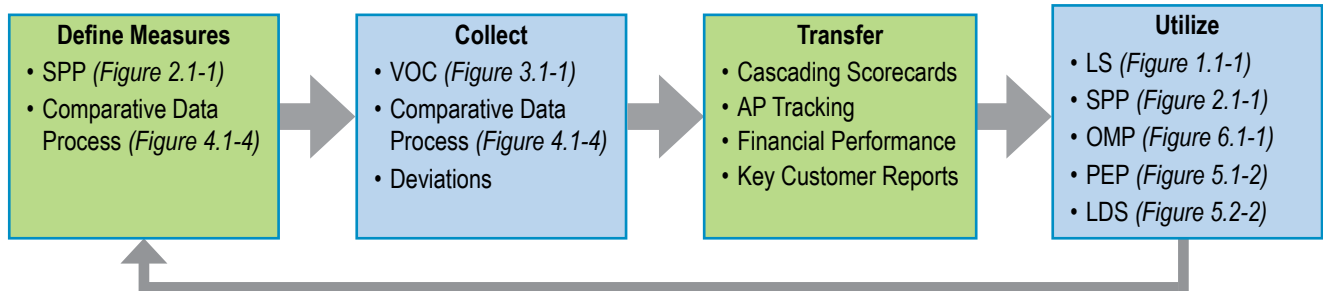


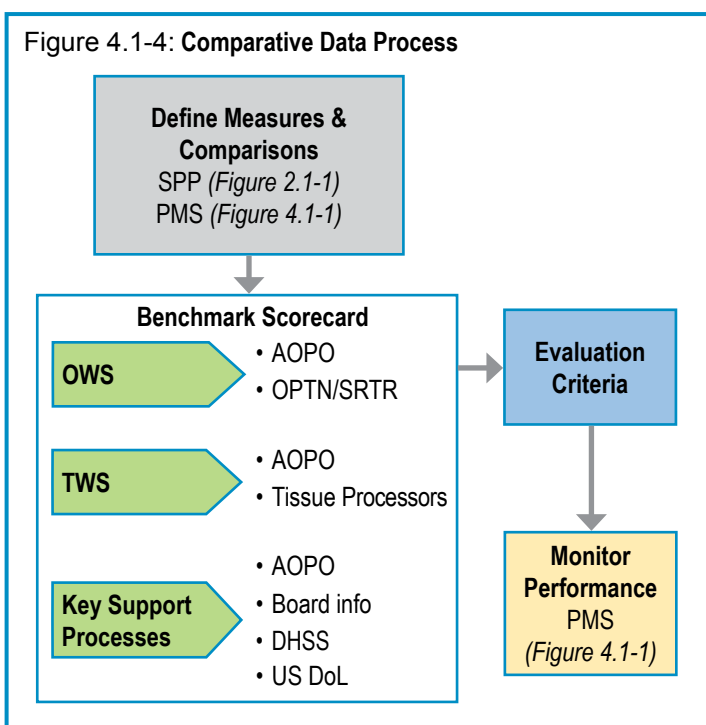
Figure 4.1-2: Topline Scorecard

Topline Key Metrics	2019 Year to Date			End-of-Year Projection		Last Year
	Actual	Target	% Gap	Annualized	Year-End Target	2018
First-Year Turnover Rate	22.0%	31.5%	30%	22.0%	31.5%	38%
Organ Conversion	58%	60%	-3%	58%	60%	58%
Organ Donors	120	125	-4%	160	110	150
Organs Transplanted	335	330	2%	440	375	430
Donor Services Authorization Rate	55%	55%	0%	55%	55%	53%
Bone Donors	500	520	-3.8%	667	800	650

Figure 4.1-3: Key Financial Measures		
Key Financial Measures		
Short Term	Consolidated Results of Operations	7.5-1
	Days Cash on Hand	7.5-9
	Days in Accounts Receivable	7.5-5
Long Term	Operating Reserves	7.5-8
	<b>Total Assets</b>	7.5-10
	Average OAC Comparison	7.5-12

**4.1a(2)** LOTS uses the Comparative Data Process (*Figure 4.1-4*) to select and effectively use key comparative data and information to support operational decision making. In the OWS, national regulatory agencies select key performance indicators and establish performance threshold levels that must be met by all OPOs in order to maintain designation. Published quarterly, this information is used to identify gaps in performance between LOTS and high-performing peers. The OPO Calculator is a gage of organizational performance. Provided by the Scientific Registry of Transplant Recipients (SRTR), this tool allows for the monitoring of local organ donor yield by comparing observed (actual) results versus what would be expected based on the national experience (*Figure 7.1-19A*). This information is used in post-case reviews, SDs, and ODs, and gaps in performance are addressed accordingly.

Due to the lack of a standard national process or availability of comparative tissue data, the selection of key performance indicators and the determination of performance thresholds are established by tissue processors. Processors track OPO



performance regularly on scorecards. These data support operational decision making as they allow LOTS to assess its success in meeting tissue processor requirements and permit the identification of best practices. For example, while LOTS's procurement efforts met the Tissue Transformations requirement for average usable skin yield per donor, an operational decision was made to exceed the processor requirement by increasing skin yield results. LOTS contacted the Tissue Transformations liaison, discussed best practices, and implemented a new process for recovering skin that has led to sizeable improvements (*Figure 7.1-23*).

**4.1a(3)** LOTS formally reviews the PMS (*Figure 4.1-1*) and modifies it as appropriate during the SPP, ensuring that the organization is current with accreditation, regulatory, operational, and financial needs and requirements. The organization addresses rapid or unexpected changes and their impact on the PMS during ODs and SDs and within the work system meetings (*Figure 6.1-1*). The formal PDSA improvement methodology, in conjunction with the organizational structure (*Figure 1.2-2*) and ongoing SDs, ensures that the organization is agile and able to respond quickly to issues that arise.

#### 4.1b Performance Analysis and Review

The LT reviews the key organizational performance measures and capabilities during work system meetings as part of ODs and during quarterly C&C meetings. Individual LT members are also responsible for conducting monthly reviews of work system and department scorecards within their scope of responsibilities, as appropriate, within the OMP (*Figure 6.1-1*). Comparative and customer data are inputs into the PMS and are used to review performance metrics. These reviews identify gaps to goals and comparisons to provide a mechanism to generate steps to bring performance back on track, as needed. PI staff members are responsible for data validation and analysis using a variety of statistical tools, and they work collaboratively with LT members to ensure LOTS's ability to meet goals and objectives. Scorecards and data reports are stored in a Data Mall on the intranet that is accessible 24/7.

LOTS reviews progress relative to the SOs, key process outcome measures, and APs during SDs and through the OMP to ensure that the organization is on target to meet or exceed the defined goals and is progressing towards best in class in all areas. Organizational performance, competitive standing, financial health, and completion of SOs and APs begin with the Topline Scorecard and cascade to department scorecards. Scorecard reviews provide a mechanism to rapidly respond to changes identified through the SPP or OMP, as well as to ensure changes to APs as appropriate, which might include a response to a transformational change in structure or work system. The workforce is provided with updates on key organizational metrics and APs at various meetings, and they have the opportunity to ask the LT questions regarding organizational performance and direction.

The BOD reviews the organization's performance by reviewing the Topline Scorecard and monthly financial statements. The CEO reports on gaps in performance; progress is also reported on achieving strategic SOs and APs.

#### 4.1c Performance Improvement

**4.1c(1)** The organization's future performance is projected through the analysis of three-year, historical, organizational trend data and industry trends to identify gaps and areas of opportunity. This analysis creates short- and long-term projections that are utilized in the PMS (*Figure 4.1-1*) and PEP (*Figure 5.1-2*). Identifying top-decile performance from comparative organizations for key measures creates a benchmark and a course of action for improvement efforts, as applicable. If indicated, APs are created to replicate the top-decile performance of comparative organizations. The collegial nature of the industry creates an environment for open dialogue for sharing the necessary steps to replicate benchmark results demonstrated by other organizations.

Reconciliation of differences between projections of future performance (4.1[b]) and performance projections (2.2[b]) occurs through the PMS.

**4.1c(2)** LOTS utilizes the systematic review of performance data in the OMP (*Figure 6.1-1*) to identify opportunities for improvement and innovation in the in-process and outcome measures. These findings form the foundation for the organization's continuous improvement approach. Discussion in the OMP also provides opportunities for identifying possible improvements or innovations. If indicated, a team may be identified to look at possible opportunities. The team develops ideas that are vetted through the LT for prioritization and disposition. Approved plans are deployed via the Communication Process. Directors and managers deploy the priorities and opportunities to members of their respective departments and work groups. Incorporation of a project report at staff meetings, using the Communication Process, reinforces the departmental and work group discussions. When appropriate, priorities and opportunities are identified, and organizational APs are deployed to LOTS's suppliers and partners through the OMP.

### 4.2 Information and Knowledge Management

#### 4.2a Data and Information

**4.2a(1)** LOTS's policies and procedures address accuracy from the initial referral, through the organization's work systems, to the allocation of organs and tissues. Clinical information is entered into Transplant Technology, an electronic software system that now has several built-in accuracy and error-proofing checkpoints. For key nonelectronic data, LOTS ensures accuracy and integrity through manual validation of reports and audits of critical information. For example, upon case completion, both electronic and nonelectronic data are validated through chart review by the Quality Systems (QS) department to ensure accuracy. QS staff members conduct monthly audits, ensuring a systematic approach for existing

process evaluation and feedback. Validity, integrity, reliability, currency, and confidentiality (*Figure 1.1-2*) of electronic data and information are ensured through the methods listed in 6.2b.

**4.2a(2)** Data and information availability is critical to the ability of the workforce to carry out the mission to save lives. Because many employees work off-site, electronic systems are used to ensure that staff members have access to critical data and information. To ensure user-friendly access while keeping all confidential data secure, the corporate intranet may only be accessed remotely via a direct access software. Because the staff access and input data from a remote location, the EMR is accessible wherever web access is available. Laptops are issued with password-protected, encrypted, disk partitions to protect data from compromise in the event of theft and/or loss. The timeliness of data is crucial to the processes for donation and transplantation. The Transplant Technology system creates real-time access to donation activity for the workforce and partners. To gain needed access, data not stored in Transplant Technology can be obtained through multiple methods including telephone, fax, email, and the Data Mall.

LOTS provides information to the workforce, partners, suppliers, customers, and collaborators using the Communication Process (*Figure 1.1-3*). In addition, LOTS provides information to customers through real-time access to the Transplant Technology system for read-only information. Transplant Technology clinical data are uploaded into a national database, DonorNet. These data are used by regulatory bodies and organizations within the industry for collaboration. Access to such critical data has improved turn-around and decision-making time for LOTS's partners. Tissue processors can access critical data through a dedicated SharePoint portal and can receive real-time data via XML transfer from Transplant Technology. The requirements for key suppliers are captured annually through the SPP and ongoing SDs. Currently, there are no operational requirements for suppliers to be linked with LOTS's data information systems (IS). Information and data are made available to suppliers via electronic means, conference calls, and in-person meetings, as appropriate. Through cycles of learning and strategic improvement, before implementation of new software and/or hardware, a user committee is formed to ensure that the software and/or hardware is user-friendly, accessible, and functional.

#### 4.2b Organizational Knowledge

LOTS relies on electronic means, as well as personal communication, to manage information and organizational knowledge. The organization is able to capitalize on the accessible Organizational Structure (*Figure 1.2-2*) through the SPP (*Figure 2.1-1*) and the OMP (*Figure 6.1-1*). These systems work together to synthesize information and turn it into knowledge that can be used to innovate and manage work systems and processes.

**4.2b(1)** LOTS collects information from people, processes, and the environment through electronic and nonelectronic



methods via the PMS (*Figure 4.1-1*), which feeds into the OMP where SDs or ODs occur and information is analyzed and translated into actions. The LDS (*Figure 5.2-2*) and the Communication Process (*Figure 1.1-3*) demonstrate how job-related knowledge is disseminated. Transfer of workforce knowledge readily occurs due to the alignment of the workforce into work systems. Multidisciplinary meetings within the work systems ensure that consistent messages and information are shared. One-on-one RFO conversations among staff members and their direct managers ensure that the organization benefits from the knowledge assets of the workforce. Ideas

and information gathered through the systematic deployment of RFO are shared with the workforce at staff meetings via a Stoplight Report. The intranet serves as a 24/7 vehicle to disseminate information to a decentralized workforce. LOTS reports organizational information through the PMS and analyzes it to create knowledge using the SPP, SDs, and the OMP (*Figure 6.1-1*).

As evidenced in the second step of the PMS, a variety of data types are collected from customers via the VOC (*Figure 3.1-1*) and remaining stakeholder groups (*Figure 4.2-1*), in addition to clinical information captured through the organization's

**Figure 4.2-1: Voice of the Stakeholder (VOS)**

Method		Frequency	Collaborators		Partners		Suppliers					Internal	
		A = Annual M = Monthly O = Ongoing Q = Quarterly W = Weekly	Donor Families	Funeral Homes	Donor Hospitals	Non-Hospital Referral Sources	Guardian	Wright Brothers	TT	Transplant Tech.	Columbia Cremation	Board of Directors	Workforce
Collect ( <i>Figure 4.1-1</i> )	Operational Discussions	O		•	•	•	•	•	•	•	•	•	•
	Supplier Meetings	Q, W					•	•	•	•	•		•
	Strategic Discussions	O			•	•	•	•	•	•	•		•
	Participation in SPP ( <i>Figure 2.1-1</i> )	O			•		•	•	•	•	•	•	•
	Rounding / PEP ( <i>Figure 5.1-2</i> ) / LDS ( <i>Figure 5.2-2</i> )	O											•
	Surveys	O	•	•	•	•				•		•	•
	Audits, Internal/External	O			•	•	•	•	•	•	•	•	•
	Social and Electronic Media	O	•		•	•		•			•	•	•
	Corporate Compliance Process ( <i>Figure 1.1-2</i> )	O	•		•	•	•	•		•	•	•	•
	Contracts	O	•		•	•	•	•	•	•	•	•	•
CAPA/Deviations	O	•	•	•	•	•	•		•	•		•	
Transfer ( <i>Figure 1.1-3</i> )	Best Practice Sharing	O			•	•				•	•	•	•
	Scorecards / Status Reports / Metrics On-Demand	O			•	•	•	•	•	•	•	•	•
	Survey Feedback Reports	A, O	•	•	•	•		•			•	•	•
	SOPs / SharePoint / Intranet / Email	O									•	•	•
Utilize	Strategic Planning Process ( <i>Figure 2.1-1</i> )	O	•	•	•	•	•	•	•	•	•	•	•
	Survey Feedback / Baldrige Feedback / Annual Report	A	•	•	•	•	•	•		•	•	•	•
	CAPA/Deviations / Corporate Compliance Process ( <i>Figure 1.1-2</i> )	O	•	•	•	•	•	•	•	•	•	•	•
	Best Practice Sharing	O	•		•	•	•	•	•	•	•	•	•
	OMP ( <i>Figure 6.1-1</i> )	O	•	•	•	•	•	•	•	•	•	•	•

EMR (Transplant Technology). For example, combining the SRTR data with the Transplant Technology data to analyze 2018 organ yield data provided information about the quality of 2018 donors that was used to validate future performance projections. A variety of mechanisms found in the OMP are used to transfer relevant knowledge to customers, suppliers, partners, and collaborators. The PMS serves as the basis for the knowledge assembly to integrate into the OMP and SPP. These processes involve detailed data analysis developed in collaboration with the PI staff. Improvement initiatives are presented at LT meetings to ensure transfer of knowledge and help drive improvement and innovation throughout the organization. Step 3 of the PMS ensures the transfer of organizational awareness and knowledge.

**4.2b(2)** The scorecards and Comparative Data Process within the PMS (*Figure 4.1-1*) provide the organization's workforce with tools to monitor organizational performance, including identification of best practices. Performance review data, which include evidence of high performance within organizational units and best practices, are shared across the organization in SDs via the SPP, OMP, and Communication Process. Implementation of best practices is accomplished

through the development of APs and ongoing monitoring of the PMS for success. For example, the Communication Center department's organ authorization rate for 2018 (*Figure 7.1-17*) exceeded all previous records. Best-practice identification included monitoring monthly gaps in performance at the individual level and the use of a department manager to support and retrain struggling individuals, as well as identification of best practices. Information on the best practices was shared at the OWS/TWS meetings, which contributed to the hiring of a combined TWS/OWS trainer.

**4.2b(3)** LOTS has a number of processes in place to ensure that learning is embedded in the organization. The primary mechanism for this is the LDS (*Figure 5.2-2*), which is aligned and integrated with multiple organizational processes. Specific processes include regular training offerings in response to staff feedback and organizational gaps, and personal learning goals for staff members. Knowledge sharing is a standing agenda item in work system meetings. For example, an improvement team was used to increase satisfaction with staff meetings, which resulted in the addition of manager report-outs and a Q/A session with the CEO at each meeting.

## Category 5: Workforce

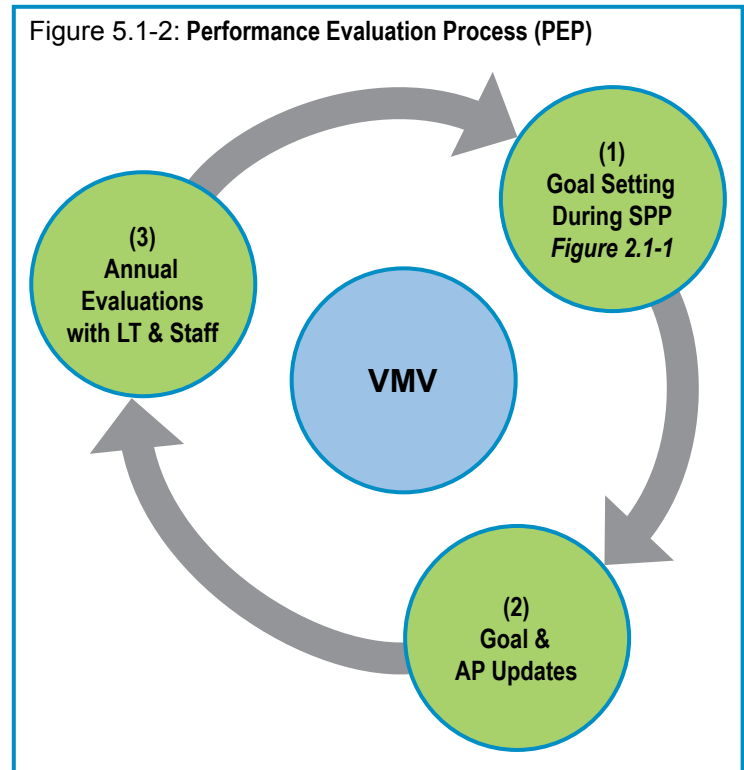
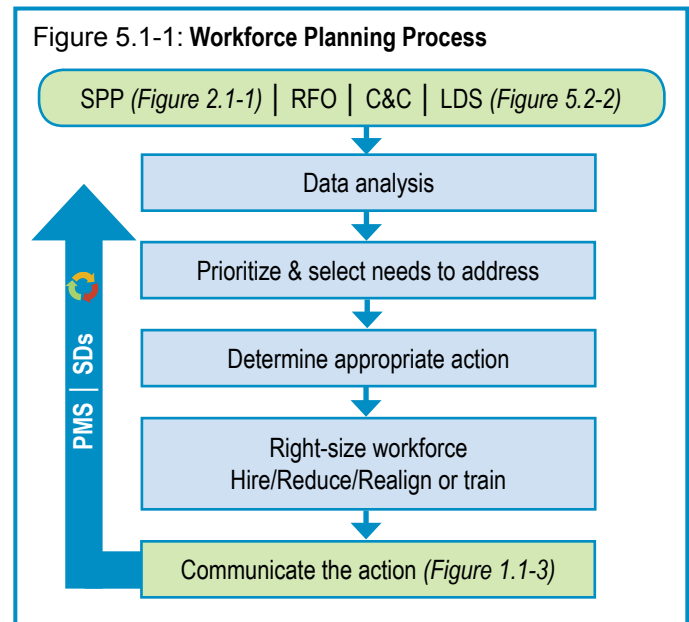
### 5.1 Workforce Environment

#### 5.1a Workforce Capability and Capacity

**5.1a(1)** Workforce C&C is assessed through the Workforce Planning Process (*Figure 5.1-1*). The organization has identified the skills and competencies that are needed to perform each role within the organization successfully. To better define capability, LOTS identifies necessary skills in job descriptions, and job competencies are monitored through the PEP (*Figure 5.1-2*). LOTS continually evaluates the need for new competencies through multiple input mechanisms, including the SPP (*Figure 2.1-1*), RFO, LDS (*Figure 5.2-2*), and C&C meetings. In addition, the need for various certifications is discussed during the Hiring Process (*Figure 5.1-3*) as a condition of employment, if applicable, and is included in the job description for the role. After hiring, the certification requirements, if applicable, are discussed through the communication cycle and documented in the employee's training file.

LOTS systematically assesses staffing levels by soliciting feedback through RFO, ongoing SDs at work system meetings, LT meetings, ELT meetings, and C&C discussions. Using the PMS, LOTS forecasts staffing needs in the SPP (*Figure 2.1-1*). The SPP assists with projecting potential staffing needs one year out, ensuring a right-sized workforce for the organization. As an example, in the Communication Center department, the capability to provide ongoing support and training for staff members approaching families was identified as a department need. Ongoing SDs and C&C meetings led to the addition of a trainer to the department in 2016. Subsequent C&C meetings and SDs led to the transition of the trainer to a manager/trainer in early 2018. The resulting organ authorization rate for the Communication Center for 2018 was the highest in organizational history (*Figure 7.1-17*).

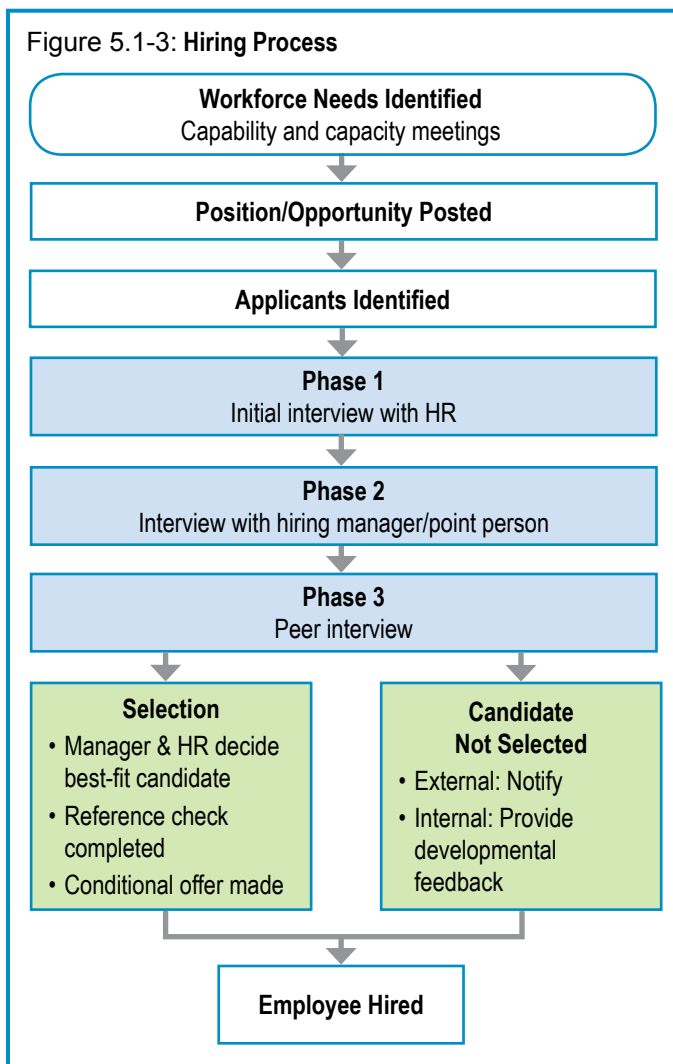
**5.1a(2)** LOTS uses the Hiring Process (*Figure 5.1-3*) to recruit, hire, place, and retain new workforce members. Validated in the workforce survey (AOS), LOTS's mission is the highest scoring key factor for staff engagement and satisfaction (*Figures 7.3-12 and 7.3-12A*). Therefore, hiring right-fit talent begins prior to employment by ensuring that the organizational culture is clear to all applicants (*Figure 5.1-3*, Phase 1). To ensure that the workforce represents the diverse cultures of the community, LOTS uses diverse recruiting methods, including local community colleges and universities, as well as social media sites. Donor families and recipients are also considered for appropriate positions within the organization. These individuals reflect the thinking of the



organization's key communities by already possessing a strong connection to the mission. The fit of organizational culture with new staff is ensured through several hiring and onboarding processes including shadowing and behavioral-based interviewing practices.

**5.1a(3)** LOTS prepares the workforce for changes in C&C needs through the Workforce Planning Process (*Figure 5.1-1*). Information about changing C&C requirements and needs, including workforce growth, is gathered through several methods including C&C meetings and RFO. Through the Workforce Planning Process, LOTS manages the needs of the workforce and the organization, ensures continuity, prevents workforce reductions, and considers periods of growth (2.2a[4]). Additionally, the Hiring Process (*Figure 5.1-3*) supports continuity by encouraging promotion from within, as well as cross-training for applicable roles, whenever possible. Should a workforce reduction, period of growth, or change in organizational structure or work system be required, qualitative or quantitative information from the PMS (*Figure 4.1-1*) would be used to conduct a series of SDs to determine appropriate action. Such action might include recruitment, contingency planning for remaining staff, or potential reassignment or exit strategy for affected staff.

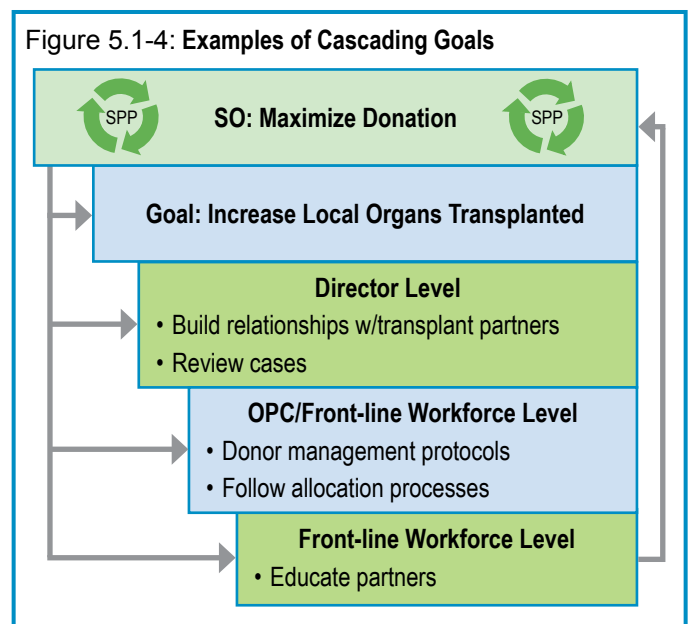
**5.1a(4)** LOTS organizes and manages its workforce at the individual, key process, and work system levels through systematic cascading of goals/scorecards (*Figure 5.1-4*).



The LT provides work system oversight and strategic direction through the LS (*Figure 1.1-1*), which serves as the foundation for key decision making.

Systematic cascading of goals/scorecards reinforces a customer and business focus. The reinforcement of customer and business needs is a priority and is managed by the LS, which incorporates approaches for creating the environment, operationalizing the strategy, and monitoring the organization's performance. This approach begins with the Hiring Process (*Figure 5.1-3*), which ensures that the best candidates are hired and fit with the LOTS culture of a mission-driven workforce (CC). The integration of the LDS (*Figure 5.2-2*) with the LS reinforces the V/M/V and provides training for performing daily tasks and meeting customer needs. Workforce members are empowered to make decisions for the prompt resolution of customer concerns. These efforts lead to competence in the delivery of service, which allows the organization to meet and exceed customer satisfaction and to strengthen loyalty (*Figure 7.2-4*).

The SPP (*Figure 2.1-1*) creates focus, establishes priorities, and sets expectations for the work of the organization, while ongoing performance is monitored through the PMS (*Figure 4.1-1*) and PEP (*Figure 5.1-2*). Performance expectations are reinforced through SDs, RFO, and PEP. Organizational goal ranges are established to define how employees can exceed expectations. Ongoing discussions are supported through a web-based PEP system that uses targets for APs to create an awareness of how each member of the workforce can meet and exceed expectations and subsequently be rewarded through multiple mechanisms. Organizational transparency and accountability are ensured through the web-based system, allowing each member of the workforce to monitor all staff progress towards goals.



## 5.1b Workforce Climate

**5.1b(1)** LOTS systematically assesses workplace environmental factors to ensure and improve workforce health by using a comprehensive wellness program. Components of this comprehensive wellness program include exceptional health insurance packages, \$20/month reimbursement towards wellness-related expenses, no-cost wellness screenings (*Figure 7.3-5*) and flu shots, 24/7 access to an employee assistance program, and other health opportunities. Workplace environmental differences are not pertinent for these benefits; these programs encourage employees to become more proactive in improving their overall health.

To ensure and improve workforce security (*Figure 7.3-9*), LOTS maintains a safe facility complete with automatic locking doors and 24/7 video surveillance. Badges are required for entry into all the work areas of the facility, with levels of restriction based on job function. To ensure a secure workplace environment, policy requires all visitors to sign in and be escorted by an employee through the building. To ensure workplace security for employees who work in different workplace environments, including at area hospitals, employees are required to adhere to that site’s unique security measures. LOTS has taken additional measures to ensure the security of the workforce by offering personal alarms to all staff members. Training in CPR, workplace violence response, and defensive driving classes are also provided.

LOTS ensures workplace accessibility by maintaining an Americans with Disabilities Act (ADA)-compliant facility with handicap entrance options. Moreover, LOTS is an equal opportunity employer and maintains realistic and flexible expectations regarding the importance of reasonable accommodations. To guarantee technological workplace accessibility, LOTS provides all employees with IT training to ensure their understanding of the IT systems.

A sample listing of performance measures for workforce health, security, and workplace accessibility can be found in Workplace Environment (*Figure 5.1-5*) and Workforce Preparedness (*Figure 7.3-6*). These performance measures are designed to provide a work environment conducive to supporting the LOTS workforce to accomplish the mission.

**5.1b(2)** Focusing on the CC of a mission-driven workforce, LOTS maintains a workforce philosophy of “*We take care of ‘Our People’ so they can take care of others.*” To meet the needs of a diverse workforce, multiple benefits plan options are available with distinctions within the services, benefits, and policies dependent on workforce demographics, including tenure and performance.

The supportive work environment includes multifaceted health, financial, and scheduling options and benefits. The workforce services, benefits, and policies are assessed in the workforce survey. LOTS has many services as a part of its wellness initiative that are available to all employees, including health screenings, flu shots, a health coach, voluntary

Factors	Measures	Results
Health	EAP	AOS
	OSHA Compliance	7.3-7
	Wellness Program	AOS
	Wellness Screening Participation	7.3-5
Security	Limited access by job function	AOS
	ERP	AOS
	Training	AOS
Accessibility	ADA compliant	AOS
	EEOC compliant	AOS
	IT resources	AOS

smoking cessation programs, optional flexible scheduling, and an employee assistance program, which is available to staff members as well as their family members.

LOTS supports its workforce by providing a comprehensive insurance benefit package to all full-time employees; the package includes three medical plan options, as well as dental and vision plans, on a tiered-cost platform. Employees can select the best plan to meet their medical, financial, and family needs. The organizational policies that support the workforce include a generous paid time-off (PTO) plan, Extended Medical Bank (EMB) plan, paid holidays, and tuition assistance. Benefits with financial impacts may vary based on staff type, length of service, and performance. A generous 401k plan, which includes a discretionary contribution, is provided to all eligible staff members. Employees who choose the Employee Key Requirement (EKR) of benefits in the 2017 staff survey scored their satisfaction at 85%, meeting the industry comparative (*Figure 7.3-15*). These workforce benefits and policies enable LOTS to strengthen its CC of fully engaged workforce members who are motivated to fulfill its mission to save and improve more lives.

## 5.2 Workforce Engagement

### 5.2a Assessment of Workforce Engagement

**5.2a(1)** The key drivers of workforce engagement are determined through customized workforce surveys developed by Survey System Success. From 2008 through 2014, the engagement elements included in the workforce survey were determined by a staff focus group. The survey included open-ended questions to assess each employee’s drivers of workforce engagement and satisfaction. All workforce segments indicated that the overarching reasons for working at LOTS were the mission, relationships with coworkers, and benefits. Survey results during this time period were exceptional, with the organization scoring in the 90th percentile in the vendor’s database for the 2014 survey. A different vendor was chosen for the 2017 workforce survey. The goal for changing

providers was to gain a deeper understanding of employee engagement, validation of the key drivers of employee satisfaction and engagement, and actionable feedback. The vendor chosen for the 2017 survey, Excel Employee Engagement, allowed the staff individual selection of satisfier and engagement drivers (EKR). Excel Employee Engagement also provides benchmark data from a variety of sources, including a benchmark from a cohort of 400 health care organizations and an OPO/blood donation facility benchmark. Segmented survey results, including several benchmarks, are AOS.

**5.2a(2)** LOTS assesses workforce engagement through the Workforce Survey Process (AOS). Through learning and strategic improvement, the survey has gone from an internally tabulated questionnaire regarding culture and benefits, to an externally developed process that includes national benchmarks and provides input into the SPP (Figure 2.1-1). The 2017 workforce survey validated LOTS’s CC of a mission-driven workforce (Figures 7.3-11, 7.3-12, and 7.3-12A). The Workforce Survey Process allows measurement of engagement across workforce groups and segments, including work system, tenure, and department (AOS). Workforce retention is measured on the Topline Scorecard and has remained a priority (Figure 7.3-13). Departmental retention is assessed, and APs may be developed for areas that are falling below target. Absenteeism is not monitored as an organizational metric but is monitored on a case-by-case basis. Productivity is monitored through the accomplishment of APs through the PEP and PMS and is measured via gross revenue per full-time employee (FTE; AOS). Productivity of the workforce is acknowledged through the Rewards and Recognition Program (Figure 5.2-1).

**5.2b Organizational Culture**

The LS (Figure 1.1-1), PMS (Figure 4.1-1), SPP (Figure 2.1-1), and V/M/V foster and reinforce an organizational culture characterized by open communication, high performance, and an engaged workforce that provides excellent service to its customers. As a component of the Communication Process (Figure 1.1-3), RFO fosters open communication. The 2017 workforce survey noted satisfaction with clear, effective communication at 75%, exceeding the health care median by 15% (AOS). The RFO questions have varied based on SDs and staff feedback and currently include questions like “What do you need to accomplish your goals?” and “Is there anyone you would like to recognize?” A Stoplight Report (AOS) was designed to communicate progress to the organization as part of a staff meeting; this serves as a feedback loop and possible input into organizational improvements. An engagement tool was added in 2018 and offered the staff the option to attend a group lunch hosted by the CEO. This setting allows employees to have access and conversations with the CEO in small-group settings. These “Café CEO” lunches have provided an additional forum for open communication.

The SPP and PMS provide the foundation for a culture of high performance. The PMS engages both leaders and employees in defining high-performance work, which is documented through the PEP. Employee performance and success are evaluated based on completion of APs and achievement of specific goals that align with the SOs. The LT regularly acknowledges success to drive a high-performance workforce through the Rewards and Recognition Program (Figure 5.2-1). RFO also encourages high performance and achievement of goals through regular goal review.

LOTS fosters an engaged workforce through the V/M/V (Figure P.1-1). To reinforce LOTS’s cultural message, donor families and recipients periodically attend staff meetings and share their heartfelt stories. These stories allow LOTS to put a face to the mission, while motivating, inspiring, and engaging the staff. These touching testimonies are why the LOTS workforce works so hard to fulfill its mission. In 2017, staff members scored their connection to the mission at 93.7%, the highest of all 22 EKRs, exceeding the health care median benchmark (Figure 7.3-11). In addition, values are part of the PEP (Figure 5.1-2) system and are highlighted at various staff meetings to demonstrate how that value may be applicable in day-to-day work for staff. For example, a recent staff meeting presentation was made around the value of honesty and the applicability of that value when dealing with donor families.

The Communication Process engages the LOTS workforce in sharing ideas and ensures that the organization benefits from the diverse ideas, culture, and thinking of the workforce to support the organizational culture. The workforce is empowered to make decisions and acts to achieve individual and organizational success through transparent communication, and specifically through the PMS and PEP. Leveraging its mission-driven workforce (CC), LOTS ensures that the right staff member is placed in the right job with the right training, empowering the workforce to provide superior customer service (including resolution of complaints), resulting in customer loyalty and engagement (Figure 7.2-4).

**Figure 5.2-1: Rewards and Recognition**

Given by LT	Given by Staff	Reward/Recognition	Organization-Wide	Departmental	Individual
★		Congratulatory slide at staff meeting	✓	✓	✓
★		Sharing of recipient thank-you letters	✓	✓	✓
★	★	Personal notes/emails/cards	✓	✓	✓
★	★	Peer-to-peer recognition	✓	✓	✓

The key drivers of employee engagement and satisfaction have been determined using the workforce survey and the Communication Process (*Figure 1.1-3*). In the 2017 workforce survey, the overall engagement score was 75%, exceeding the health care median as well as the OPO benchmark group. Workforce survey segmentation based on demographics, including work system, tenure, and length of service, is AOS.

## 5.2c Performance Management and Development

**5.2c(1)** The Workforce Performance Measurement System supports high performance and engagement of the workforce and LT through the fully deployed PEP (*Figure 5.1-2*). The PEP consists of several layers that are structured and systematic. Utilizing the SPP as the foundation, APs are created using staff input to support high performance in the accomplishment of organizational goals, which ultimately drives the achievement of SOs. These goals are aligned with the V/M/V of the organization and are cascaded to the workforce. Part of the PEP also includes individual personal development goals for each staff member that help ensure personal development and growth and, ultimately, ensure that the needs of the organization are met. Managers analyze performance review scores and track goals and AP progress in real-time. The PEP is designed to ensure transparency across the organization; in turn, each evaluation tool includes results on organizational and individual goals, demonstration of core values, and personal development plans.

While staff members name the mission, coworkers, and benefits as the highest-scoring EKRs, LOTS recognizes the importance of compensation and rewards and recognition (*Figure 5.2-1*). The organization's compensation system establishes competitive salary ranges and a merit-based pay increase system to reward staff members for achievement of their goals and demonstration of the core values. LOTS has a strong commitment to maintaining market-based salaries and works triennially with an external consultant to determine necessary market adjustments. The organization's Rewards and Recognition Program includes a program that allows employees to recognize one another, accomplishment of organizational goals, and other personalized recognition opportunities (*Figure 5.2-1*).

The PEP, via the LDS (*Figure 5.2-2*), is used to evaluate effectiveness, identify learning and development needs, and serve as a direct input to the PMS (*Figure 4.1-1*). The information from the PEP is used throughout the year in ongoing SDs. LOTS's customer and business focus, as well as the achievement of APs, is guided by the PMS and reinforced by the PEP. This allows the organization to ensure that all goals and targets are closely monitored, and accountability is achieved.

**5.2c(2)** LOTS's LDS (*Figure 5.2-2*) begins with the orientation of mission-driven workforce members, alignment with the organizational culture to support the organization's needs, and the personal development of the workforce. To achieve the V/M/V, LOTS focuses on the continual development of its

staff and LT, beginning with new-employee orientation. New-employee orientation is now offered in two phases: Introduction and LOTS Learning. During the Introduction Phase, new hires are introduced to the culture and complete onboarding activities during their first week of employment to create an understanding of the organization's needs. The LOTS Learning Phase is offered as an extension of new-employee orientation. This comprehensive, eight-hour program highlights key organizational elements. Staff members participate in LOTS Learning after they have completed several weeks of employment. The utilization of a training and development goal allows staff members and leaders to identify training and development needs collaboratively, based on strengths and opportunities for the individual. This also enhances the organization's capability for goal accomplishment.

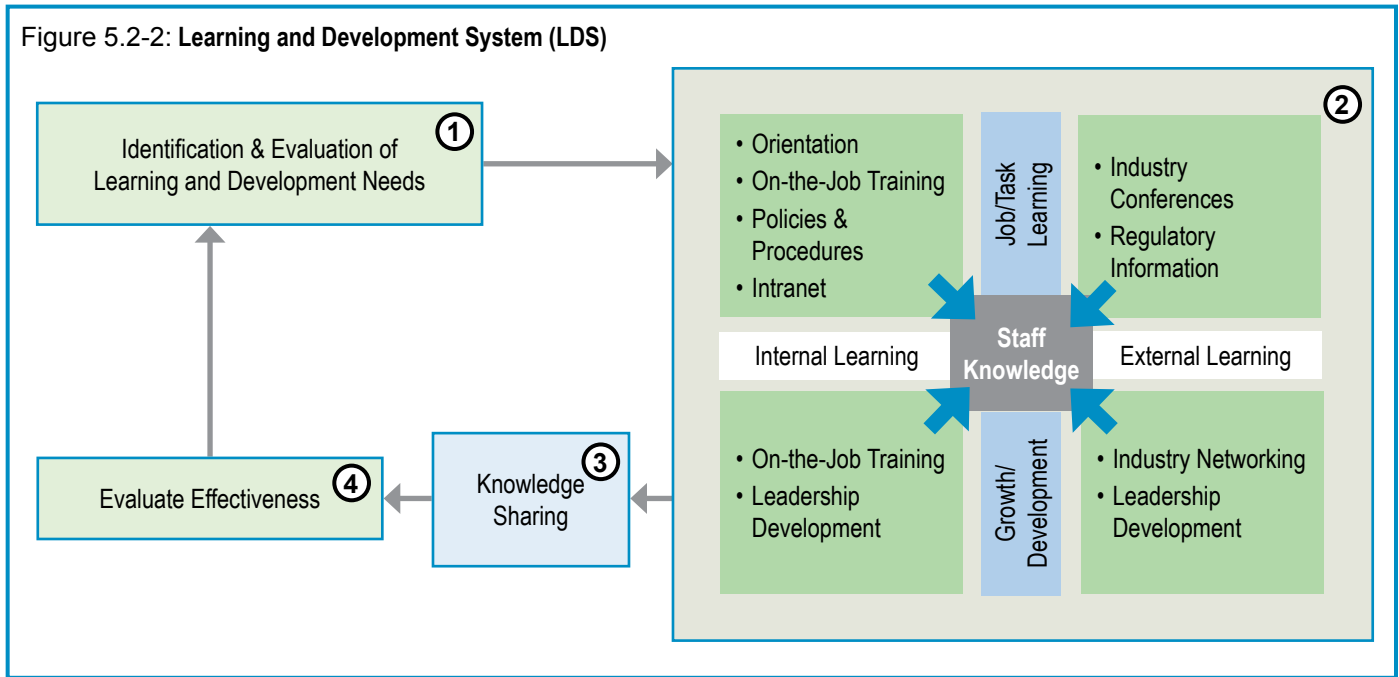
The priorities of the workforce LDS (*Figure 5.2-2*) are evaluated annually and aligned with the SOs, SCs, APs (short- and long-term), and goals to ensure support of organizational needs. As an example, an AP was initiated to implement a web-based performance management system. The complexity of the software required a two-year AP, including implementation and incorporation of future models of the software and a training component. The successful completion of this AP resulted in the workforce having 24/7 access to monitor the status of organizational and individual goals, while promoting transparency across the organization.

Organizational improvement, performance improvement, organizational change, and innovation are driven from the SPP through the LS (*Figure 1.1-1*) and the Organizational Structure (*Figure 1.2-2*), to the employee level where they are reinforced by the PMS (*Figure 4.1-1*). For all LT members, LOTS deploys a systematic leadership curriculum, which is reviewed annually. New LT members are provided with internal training to assist with cultural integration and to share organizational knowledge. Additionally, new leaders complete a leadership training session that includes coaching, performance management, behavioral interviewing, and development of decision-making skills.

To support ethics and ethical business practices, annual policy training includes review of the Conflict of Interest Policy, Code of Professional Conduct, Corporate Compliance Training, and ongoing procedure compliance. The LOTS workforce is educated on the organization's legal and regulatory requirements through mandatory training. The CCP (*Figure 1.1-2*) training is conducted during new-employee orientation, and the CCP policy competency is assessed annually thereafter; CCP training encourages the reporting of suspected breaches of policy violations or unethical practices.

To perpetuate and improve the customer focus of the organization, LOTS trains all new employees during orientation on the organization's customer complaint philosophy to ensure superior customer service. Customer focus is also achieved through a variety of APs targeting customer satisfaction and an extensive Customer Survey Process that assesses performance.

Figure 5.2-2: Learning and Development System (LDS)



The learning and development needs of workforce members are captured in RFO and are also part of the LDS (Figure 5.2-2). As a component of the LDS, LOTS reinforces new knowledge and on-the-job skills through ongoing competency testing, work system dialogue, bringing in subject-matter experts for training, and the Communication Process (Figure 1.1-3). Knowledge sharing is also a component of the LDS.

**5.2c(3)** Learning and development are critical components of staff success, which in turn drives organizational sustainability and supports the CC of a mission-driven workforce. The LDS system (Figure 5.2-2) is validated as part of the SPP; past improvements have included the addition of skills days and a formal exit interview process (AOS). In the 2017 staff survey, the EKR of continuous learning, training, and development showed an 80.6% satisfaction level, exceeding the health care mean (Figure 7.3-16). The Human Resources staff evaluates the effectiveness of training by conducting evaluations of internal and external opportunities at the organization, work system, and department levels, affording employees the opportunity to provide feedback about the training they received and also to identify any subsequent training needs of interest that will support the mission (Figure 5.2-2, Step 4). Depending on the nature of the training, learning is linked to an outcome measured in the goal plan for each employee. Staff members who attend training off-site are asked to share the information they learned at their department meetings, work systems, or

LT meetings to help other team members gain insight from the training.

**5.2c(4)** At LOTS, most job- and career-related development involves job enhancement opportunities within the organization. Due to the organization’s size and structure, career development is often supported in horizontal transitions to different roles. Over half of the workforce is in a different position today than originally hired for, and many of those have transitioned multiple times. The PEP helps identify high performers who can utilize their skills, knowledge, and abilities in various ways.

The LDS is used to prepare the workforce for replacement and succession planning. The succession plan is reviewed annually through the SPP (Figure 2.1-1, Step 5) and modified as needed by the CHRO, CEO, COO, CMO, and each LT member; the plan provides strategy for short- and long-term coverage for each LT position. The LT succession plan focuses on the development of current leaders positioned to take on additional responsibilities and emerging leaders who could serve as the next generation of leadership. Development needs of identified emerging leaders are now incorporated within the training and development plan as part of the employee’s PEP. As an example, targeted training is being provided quarterly to team leads across the organization to ensure foundational understanding, including team dynamics, difficult conversations, and team motivation.



## Category 6: Operations

### 6.1 Work Processes

#### 6.1a Product and Process Design

**6.1a(1)** Key work product and process requirements are determined through a variety of listening and learning methods via the VOC (*Figure 3.1-1*), including formal and informal surveys, feedback reports, and informal interactions. The product and process requirement analysis and discussion start in the SPP (*Figure 2.1-1*, Step 8) and continue during the year in ongoing SDs and throughout the OMP (*Figure 6.1-1*). For example, it was determined through survey data feedback that referring physicians from donor hospital partners did not feel prepared for their involvement in Donation after Cardiac Death (DCD) organ donor cases. This requirement for information was taken to the Critical Care Taskforce, and a tool was developed using its input. An information card is now distributed to physicians and nurses caring for potential organ donors to help prepare them for involvement. In 2018, there were a record number of DCD donors (AOS), and the hospital partner satisfaction exceeded prior years (*Figure 7.1-1A*).

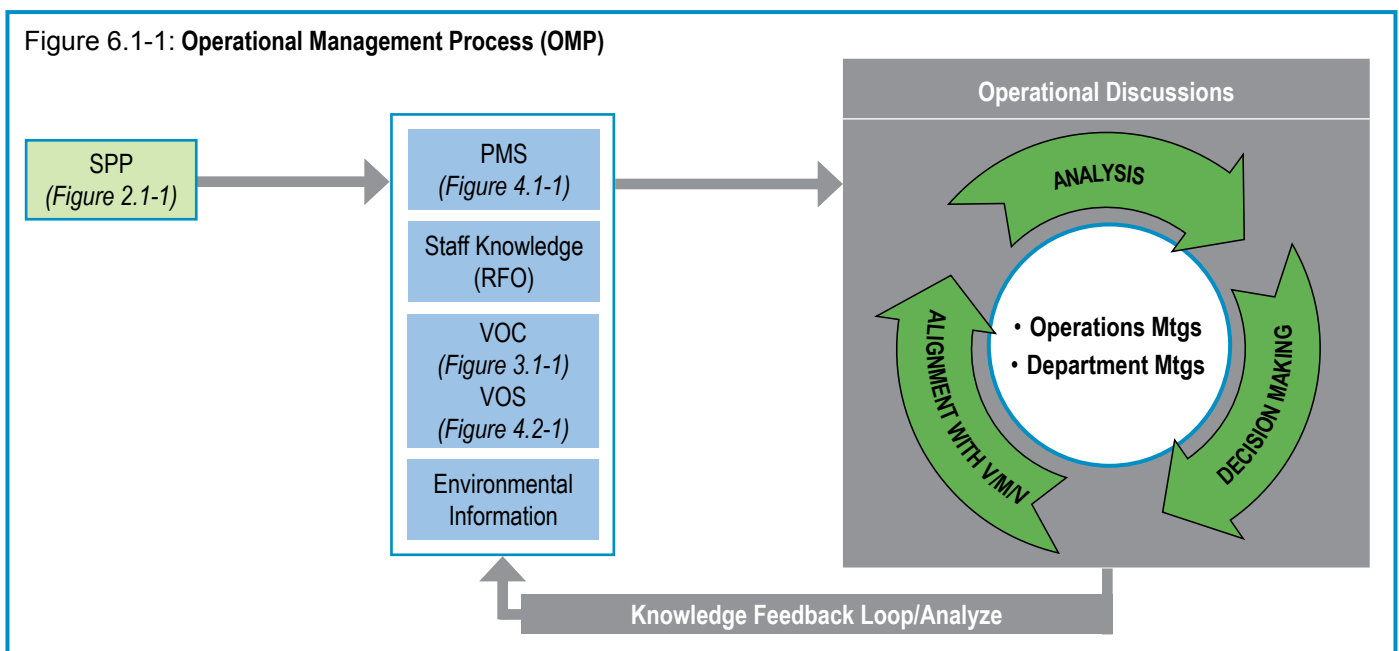
**6.1a(2)** LOTS's key service is the facilitation of organ and tissue donation (*Figure 2.1-2*), a service provided to customers in collaboration with key partners (*Figure P.1-6*). Key work processes of referral management, authorization, and procurement are designed to drive organizational sustainability by fulfilling the needs and requirements of key customers (*Figure P.1-6*). Through these key processes, the workforce advances the organization's SOs and ultimately provides organs and tissues for transplant.

**6.1a(3)** The OMP (*Figure 6.1-1*) demonstrates the methods used to design, refine, and construct key work processes to meet requirements. The OMP ensures that key requirements driving work processes are analyzed, reviewed, and translated into priorities during the SPP and continued throughout the year during ongoing SDs and ODs.

Incorporation of organizational knowledge, new technology, service excellence, customer value, risk, and agility is also accomplished through the OMP and step 4 of the LDS (*Figure 5.2-2*). Both the OMP and LDS are integral inputs into the SPP, which drives ODs, data analysis, real-time decision making, and improvement to ensure customer value. LOTS's staff members drive organizational improvements using the SPP, OMP, and the PMS (*Figures 2.1-1, 6.1-1, and 4.1-1*) to assess performance, look for improvements, and deploy appropriate solutions to meet customer needs.

#### 6.1b Process Management and Improvement

**6.1b(1)** The OMP drives work processes through multiple inputs, including the SPP, PMS, staff knowledge, and stakeholder and environmental information to ensure that they meet key process requirements. Within the OMP, the PMS (*Figure 4.1-1*) ensures that key metric requirements are measured, analyzed, and benchmarked. ODs also include analysis of metrics, evaluation of current APs and process steps, and validation that current performance is meeting or trending to meet targets. As an example, during Organ Operations meetings, a systematic review of selected organ cases is performed. During these multidisciplinary reviews, staff



members assess achievement of the Hospital Referral Process, Authorization Process, and the Clinical Procurement Process steps, along with stakeholder feedback. This systematic review helps determine if process changes are indicated and provides an opportunity to share learning across the work system to improve OWS processes.

Key performance and in-process measures used for the control and improvement of work processes are outlined in *Figure 6.1-2*. These in-process measures drive increased performance and strict adherence to processes to ensure maximized outcomes and service. An extensive set of policies and procedures, incorporating key stakeholder input, defines the work required to accomplish the key work processes. Deviations to these processes are captured in the CAPA deviation system, analyzed for trend identification, and resolved. APs are deployed and work processes are modified, as indicated. Capitalizing on LOTS's CC is critical to the accomplishment of the key work processes. Ongoing evaluation of these key work process measures occurs through the PMS; alignment and integration of performance measures begin in the SPP and continue through the OMP to ensure that all data and information needs are met to effectively manage performance

outcomes. Key in-process and outcome measure selection is used to drive and assess service quality and performance.

**6.1b(2)** The OMP (*Figure 6.1-1*) demonstrates the process used to determine the key work system requirements to construct the key support processes: Laboratory Testing, Donor Chart Review and Release Process, Supply and Equipment Management, Financial Management, HR Management, IT Management, PI, and Quality Compliance Management. Day-to-day operation of the support processes' ability to meet key business support requirements is ensured by the OMP. Within the OMP, the PMS (*Figure 4.1-1*) is used to ensure that key support metric requirements are measured, analyzed, and benchmarked to drive associated APs. ODs also include analysis of metrics and evaluation of current APs and process steps. Key support metrics are reviewed at the department level to assess performance for meeting key business requirements on an ongoing basis. For example, the laboratory requisition error rate was tracked as a key laboratory metric and was one of the highest sources of errors. Requisition errors were the source of rework and had the potential to slow the testing and/or release of critical laboratory infectious disease testing. PI, laboratory, organ, and tissue procurement departments met and developed

Figure 6.1-2: Key Work Processes						
PHASE	PRE-DONATION				DONATION	
Key Work Process	Referral Management		Authorization		Procurement/Allocation	
Work System Alignment	OWS	TWS	OWS	TWS	OWS	TWS
Key Requirement Results	Hospital Partner Satisfaction: OWS (7.1-1A)	Hospital Partner Satisfaction: TWS (7.1-2A)	Referrals (7.1-1)	Referrals (7.1-2)	Organ Donors (7.1-3)	Tissue Donors (7.1-4)
In-Process Measures	Missed Organ Referrals (7.1-15)	LOTS Tissue Approach Rate (7.1-16)	Organ Authorization (7.1-17)  Collaborative Approach	Tissue Authorization (7.1-18)  Re-approach Rate	Donor Management Protocol Compliance (7.1-20)  Organ Donor Cases In-house (7.1-21)	Bone No Growth Rates (7.1-22)  Skin Yield (7.1-23)
Outcome Measures	Organ Referrals (7.1-1)	Tissue Referrals (7.1-2)	Local Organ Donors (7.1-3)  Organ Conversion (7.1-19)	Total Tissue Donors (7.1-4)	Local Organs Transplanted (7.1-5)	Skin Donors Released (7.1-7)
How Determined • Regulatory	CMS	FDA	CMS UNOS/OPTN UAGA AOPO	UAGA AATB	VOC (3.1-1) UNOS/OPTN AOPO	VOC (3.1-1) AATB

an online laboratory requisition module that reduced the number of errors dramatically (AOS).

**6.1b(3)** Improvement of work processes, products (services), the CC, and performance is initiated through the OMP (*Figure 6.1-1*) by using the PMS (*Figure 4.1-1*) and SPP (*Figure 2.1-1*) to identify improvement opportunities. The overarching approach to support work process and product improvements is the PDSA. As an example, the TWS staff developed a PDSA to test a modified donor prep procedure to minimize the bone contamination rate, a critical metric to ensure maximizing donation and customer satisfaction (*Figures 7.2-1 through 7.2-2, 7.2-2C, and 7.2-2D*). Initial results showed improved outcomes, and the rigorous prep practice was incorporated into LOTS's policies and procedures. LOTS has had the lowest contamination rate of all Tissue Transformations partners, and the prep procedure was identified as a best practice. LOTS has trained other OPOs on the procedure. Improvements in work processes to enhance the mission-driven staff (CC) are also part of the OMP, ensuring a multifaceted and systematic analysis and discussion of product and process improvements.

### 6.1c Supply-Network Management

In a nontraditional sense, supply-network management includes the receipt of the donor referral from LOTS's hospital partners and is the most critical supply-network event for the organization (*Figure 2.1-2*). The selection of these nontraditional suppliers is predetermined by the DSA. The "donor" supply-network management entails creating and communicating performance standards and expectations during regularly scheduled meetings. In addition, there is a Standardized Identification and Referral Process at partner hospitals of all potential donors, ensuring that operational needs are met (*Figures 7.1-1 and 7.1-2*). After the initiation of the referral process, potential donor suitability is established, and the potential donor's family is approached for donation. The donor referral system is developed collaboratively with hospital and nonhospital partners, and the Procurement Process begins with the donor entering the OWS or TWS. Hospital partners initiate the referral; their supplier performance is regularly tracked via metrics noted on the Quarterly Dashboard report and in the Hospital Services scorecard. Poorly performing hospitals are identified via these metrics, and subsequent APs are established with staff buy-in to ensure improvement in outcomes. For example, one partner hospital referral compliance for 2017 was 68%. The Hospital Services staff person worked with the hospital to PDSA several improvements, including training, additional approaches to communication (including daily emails), new staff orientation, and follow-up with hospital administration. As a result of this focused PDSA, the hospital's 2018 compliance improved to 85% (AOS).

LOTS recognizes that collaborative relationships with more traditional suppliers play an important role in enhancing organizational performance and customer satisfaction. LOTS manages its traditional supply-network with an online inventory

management system. This system enables the organization to manage ordering, purchase orders, purchasing history, and supply expiration monitoring, which allows LOTS to establish minimum inventory levels that take into account lead times and expiration dates. Additionally, a Quarantine and Release Process for critical supplies ensures that sterility certificates and inventory qualifications meet or exceed industry requirements. Suppliers' performance is measured and evaluated on a variety of levels, including metrics on damaged and returned supplies and delivery times. Poorly performing suppliers are contacted to resolve recurring issues, and if issues persist, they are replaced by another available supplier/supply.

Key supplier performance (Guardian Ambulance, Columbia Cremation, Transplant Technologies, and Wright Brothers Charters) is monitored, tracked, and trended and is included in regular feedback with the key suppliers (*Figures 7.1-30, 7.1-31, 7.1-32, 7.1-33, and 7.1-34*). These key suppliers are also vetted based on their abilities to align and collaborate with LOTS. For instance, Wright Brothers Charters recently expanded its ability to transport donors by adding planes and pilots to additional sites in the DSA to ensure that it could meet time requirements.

Organizational alignment and collaboration with suppliers include ensuring that two-way communication is utilized.

### 6.1d Innovation Management

Innovation and improvement are embedded in the culture from the governance level with the BOD, down through the mission-driven workforce. Improvement or innovation is initiated and managed through the OMP (*Figure 6.1-1*), LDS, and SPP. Improvement discussions can originate in the SPP, OMP, and/or LDS, and an improvement team may be formed. An improvement team comprises staff members from departments across the organization and is led by the PI staff. During improvement team meetings, the team uses various PI tools and data analysis from the PMS to develop new processes to test and implement new ideas or processes.

The SA of financial stability positions the organization to actively pursue innovative ideas and improvements. Idea assessment includes the scope of a potential project, schedule, and needed resources, including financial resources. These are reviewed at the LT meetings. Financial and other resources are made available through a robust budgeting process and multiple financial analysis tools, including financial projections.

Decisions to discontinue pursuing opportunities at the appropriate time are evaluated through the OMP. The OMP allows for a systematic review of potential and current projects, and it ensures the agility to enhance support for higher-priority opportunities. As an example, organ biopsies had been performed in-house for many years. A discussion during a C&C meeting, along with continued discussion in the OWS meeting, resulted in the evaluation of whether biopsies should be performed in-house or outsourced. Robust discussions and analysis addressed financial, capability, and customer satisfaction. Ultimately, the

Organ Biopsy Process was outsourced, resulting in decreased cost and higher customer satisfaction (AOS).

## 6.2 Operational Effectiveness

### 6.2a Process Efficiency and Effectiveness

Overall costs of the operations, cycle time, productivity, efficiency, and effectiveness factors are assessed through the OMP, which includes inputs from the PMS. LOTS controls the overall cost of operations through efficiency and improvement gained by quarterly C&C meetings, group purchasing organizations, inventory control, and Lean tools, including process mapping. These strategies include financial analysis, such as an evaluation of budget, cost modeling, and ROI, along with ongoing SDs (*Figure 2.1-1*, Step 8). Efficiency and effectiveness factors are part of the in-process metrics included in *Figure 6.1-2*. An example of cost control is the development of LOTS's in-house OR, which incorporated customer feedback and has resulted in process efficiencies and substantial costs savings. These cost savings have impacted the charge structure, allowing LOTS's organ acquisition charges (OACs) to be below the median for all OPOs (*Figure 7.5-12*). TWS efficiencies have allowed increases in donor volume that have not required additional staffing (*Figure 7.3-3*). Another example that illustrates the reduction and cost of rework is the utilization of the CMO in real-time tissue donor suitability assessments, which have led to reductions in on-site deferrals, which have impacted overall tissue donor numbers (AOS).

Originating from the annual SPP session, a well-defined audit calendar is established each year. Audits are conducted systematically, and outcomes drive frequency and sample size, ensuring maximum effectiveness with minimal audit costs. LOTS uses an internal quality report to communicate audit findings at the LT meetings. LOTS exceeds industry standards by proactively seeking all voluntary accreditations (*Figure P.1-5*) and participating in accreditation councils. Accreditation inspections assist the organization with identifying possible gaps in practices that result in minimizing service errors, rework, and defects. Participation on the councils allows for sharing of information and best practices to proactively evaluate and improve operations. Input from mission-driven workforce members (CC) during audit preparation meetings ensures that the organization's workforce contributes to process improvement opportunities while meeting regulatory and compliance requirements. To further maximize efficiency and cost control, LOTS uses preventative measures to minimize maintenance costs, and contracts are established to ensure that capital equipment is properly maintained to prevent unplanned, costly repairs. Group purchasing agreements are utilized to leverage economies of scale in order to negotiate reasonable prices for supplies and maintenance contracts. New supply requests are evaluated and approved/denied at the director level via the Supply Requisition Process. LOTS employs comprehensive measures to maximize efficiency and ensure cost control, which are balanced with customer needs. The work within the OMP drives the organization to perform

as efficiently as possible. Cost savings allow for continued and increased funding of projects to ensure high levels of customer satisfaction.

### 6.2b Security and Cybersecurity

The IS used includes software, data, network infrastructure, computer hardware, and key assets. An overview of IS is a component of the annual SPP. LOTS uses cloud software for server hardware and data; the software provides redundancy, reliability, and monitoring tools to ensure speed, security, uptime, and overall reliability. In-house servers contain redundant components, including dual power supplies, network interface cards, and disks. All hardware is under vendor support and monitored 24/7 using various tools. Vendor contracts include requirements for responsibilities and roles regarding cybersecurity. In addition, vendor contracts include requirements to overnight hardware components that may fail; this ensures that full internal redundancy remains intact, and uptime and reliability meet organizational requirements (*Figure 7.1-30*).

LOTS utilizes Software as a Service (SaaS) as applicable. SaaS decreases risk and increases overall reliability by using various vendors that host from different servers and data centers. LOTS also uses the LinkingSmart ticketing system to track IT needs, problems, and/or issues. LinkingSmart allows trend analysis and detection of applications and components' reliability; unreliable components can then be repaired or replaced before reliability becomes an issue. Communication Center data reliability is ensured through a process that includes nightly backups, with one copy sent to a secure off-site location in Columbia, NT, and the other copy sent to Washington, DC (ensuring protection from local/regional disasters; 4.2a[1]).

LOTS has established multiple policies and procedures to ensure the security and cybersecurity of sensitive or privileged data and information. These policies and procedures outline the physical and technical safeguards for all computers that access electronic, protected, health information to restrict access to authorized users. The organization's password policy outlines the appropriate parameters for selecting and securing system- and user-level passwords. Staff members with EMR access are required to sign confidentiality agreements, and IT audits performed by QS verify appropriate access and current users.

TT is LOTS's primary infrastructure contractor. TT monitors security, including real-time alerts from threat-detection systems. TT prepares all desktop and laptop computers prior to use to ensure that they include the latest security patches, antivirus engines, and hard-drive encryption. All users are trained, and policies require staff members to lock their computers when they are away. LOTS uses fully redundant firewalls to ensure network and Internet security. The firewall includes intrusion detection and prevention features. Security patches are applied monthly for all physical servers, virtual machines, desktops, and laptops. LOTS has a mail encryption

policy, which requires encryption of all emails that contain personally identified information (PII) or personal health information (PHI).

Cybersecurity threat and emerging security issue awareness are maintained through a number of approaches. LOTS receives security bulletins directly from a third-party vendor and can respond to eminent, day-zero threats. Antivirus engines are required to be current, and they continuously scan the LOTS environment.

Identification and prioritization of technology system protection from cybersecurity attacks are provided through the utilization of SaaS, which provides hosting of solutions from complete separate servers and data centers. LOTS's payroll, accounting, EMR, and Business Intelligence systems, for example, are all hosted by different vendors at different data centers. In addition, necessary integration occurs behind LOTS's firewalls.

Detection of cybersecurity breaches is provided by monitoring tools that are in place to continuously scan the environment for suspicious activity. A cybersecurity breach has not occurred at LOTS. The response and recovery from a potential cybersecurity breach would include detection of the attack, and compromised servers would be recovered. Recovery would typically include running antivirus software and other security tools to remove and clean any viruses, Trojans, or monitoring agents. Any compromised data would be deleted and recovered from backups.

## 6.2c Safety and Emergency Preparedness

**6.2c(1)** LOTS has established a Safety Program, managed by the Safety Officer, that utilizes systematic processes, including the LDS, for ensuring a safe operating environment. Identification of workforce safety concerns and a Timely Injury Reporting Process allow for a systematic review to identify areas for prevention and improvement. Injuries are reported, and these data are monitored to identify potential trends and opportunities for training on accident prevention (*Figure 7.3-7*). In addition, a 2018 staff safety survey noted overall satisfaction with safety at 85%, an increase of 2% over the prior survey (AOS). Accident prevention, embedded in the culture of the organization, starts with new hires in orientation and continues with annual training. Prevention examples include OSHA training, blood-borne pathogens training, the provision of personal protection equipment, and staff members being provided the hepatitis B vaccine. In addition, workforce safety concerns are identified in ODs, department meetings, RFO, staff surveys, regular quality audits, and investigation of injuries. The Safety Program, utilizing the Safety Committee, recommends needed training sessions, policy change recommendations, and/or other needed safety enhancements. These learnings may result in training sessions for staff members or changes to policy, if required.

The Safety Calendar (AOS) includes monthly safety programs encompassing personal safety, CPR, automated external defibrillators (AED), fire extinguisher training, defensive driving

and driver safety, and malicious intruder training. The injury reporting process ensures that all injuries are investigated, root cause is determined, and a change in-process or environment is taken if indicated to ensure recovery. For example, in 2018, there was a 25% decrease in tissue needle sticks/injuries in the tissue procurement department, which was a result of improved training in orientation and the requiring of protective gloves. Safety knowledge is shared via the Communication Process; regular safety updates are communicated to the workforce at department and staff meetings. Fire and tornado drills, along with other safety drills, are regularly conducted. Personal safety classes now include providing personal safety alarms to staff members. Badges are required for entry into work areas, with levels of restriction based on necessity as determined by job description. Moreover, a local security company is used to provide continuous perimeter and campus security during nonbusiness hours, including weekends and holidays. Security cameras are managed in the Communication Center area and allow for 24/7 monitoring of perimeter door and access points, along with a fenced parking area for staff members.

**6.2c(2)** LOTS has a well-documented, executable disaster preparedness plan that allows the work systems to continue to achieve a high level of customer satisfaction. Emergency preparedness is ensured through regular testing and analysis of the Emergency Response Plan (ERP; AOS). The plan is a guideline that prepares the staff to respond to safety and operational disruptions in the event of an emergency. Multiple measures are also in place to ensure continuity of operations. The design of LOTS's facility ensures that all critical services, including the Communication Center, IS network, and clinical operations, are continuously online and supported by an emergency generator. Routine testing and preventative maintenance of all critical equipment optimize the organization's ability to respond to any event. Additionally, remote access capabilities allow work to continue uninterrupted in case of a disaster, emergency, or weather interruption. Remote access to phone systems ensures 24/7 remote access for external services. In the event of a disaster, an extreme volume of cases, or critical staffing shortages, LOTS has agreements with multiple other OPOs to reciprocate emergency staffing and facilities on a short-term basis. In the event of a long-term, off-site option, LOTS is prepared to complete organ and tissue clinical processes at local hospitals, and the Communication Center would be operational via remote access. Recovery following an event would be dependent on the incident or event, but LOTS's facility would be re-established at another location if necessary. The organization maintains business interruption insurance to ensure adequate financial resources to support continued operations. In the event that LOTS's continuity contingency plans, including suppliers and partners, are deemed ineffective or not available due to catastrophic circumstances, the highest-ranking leadership member available may make the decision to cease operations until alternative options are identified by the ELT.

## Category 7: Results

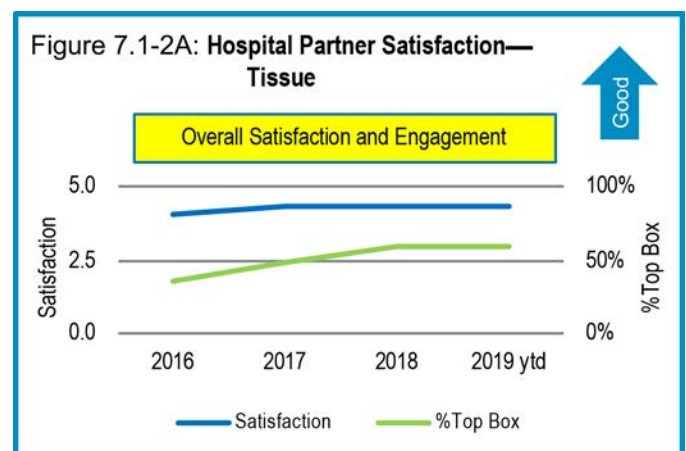
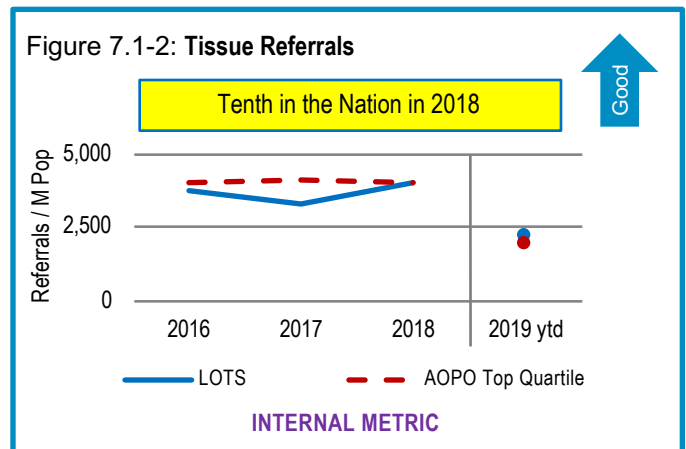
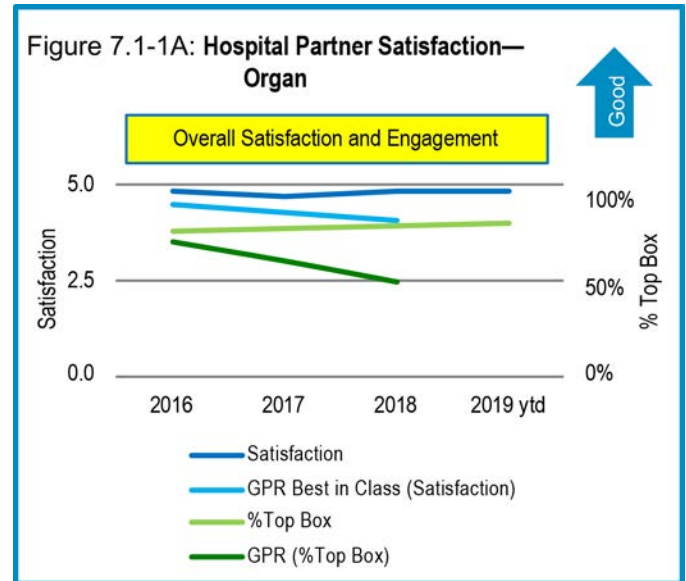
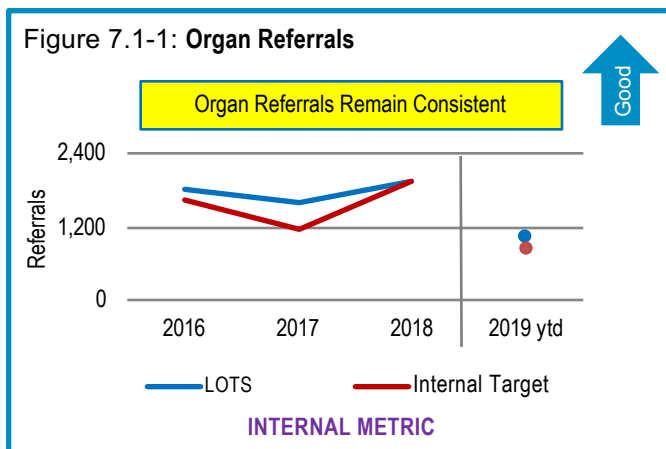
### 7.1 Product and Process Results

#### 7.1a Customer-Focused Product and Service Results

At LOTS, most job- and career-related progression involves job enhancement opportunities within the organization. Due to the organization’s size and structure, career enhancement is often supported in horizontal transitions to different roles. Over half of the workforce is in a different position today than originally hired for, and many of those have transitioned multiple times. The PEP helps identify high performers who can utilize their skills, knowledge, and abilities in various ways.

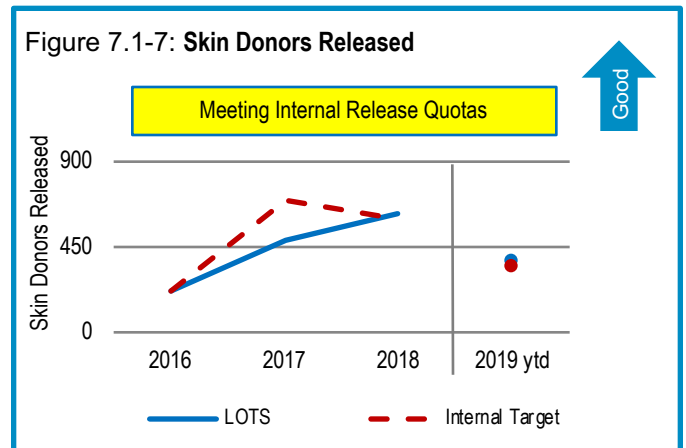
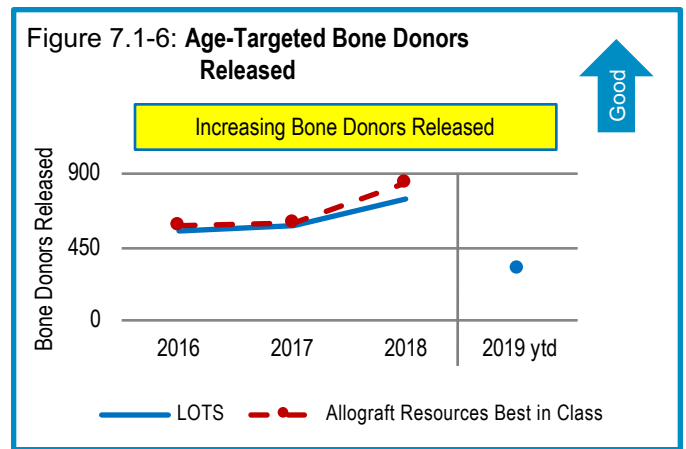
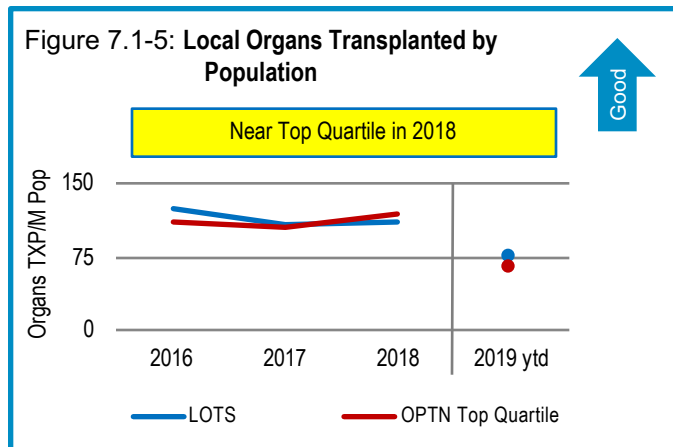
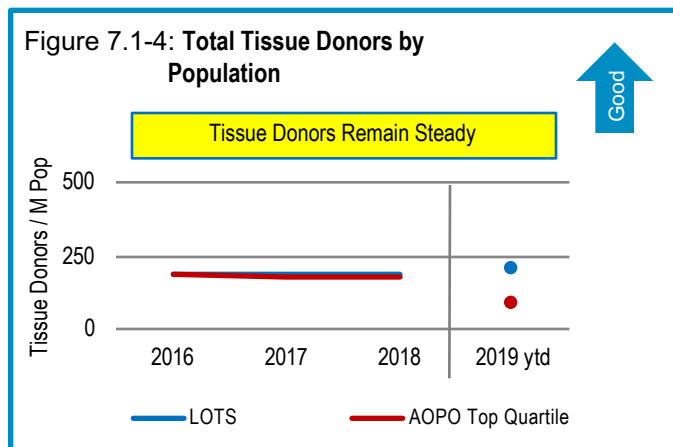
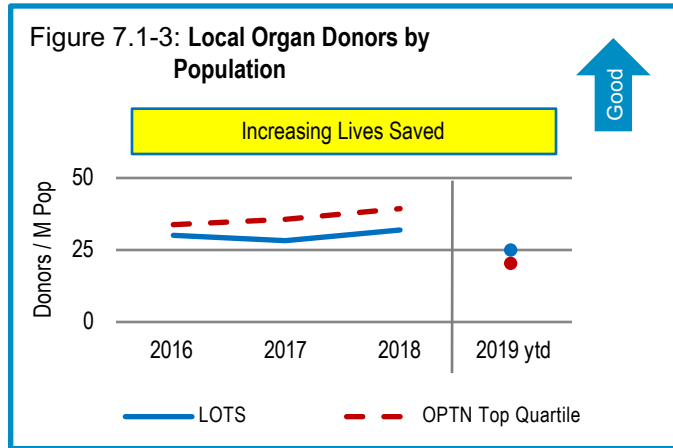
The LDS is used to prepare the workforce for replacement and succession planning. The succession plan is reviewed annually through the SPP (*Figure 2.1-1*, Step 5) and modified as needed by the CHRO, CEO, COO, CMO, and each LT member; the plan provides strategy for short- and long-term coverage for each LT position. The LT succession plan focuses on the development of current leaders positioned to take on additional responsibilities and emerging leaders who could serve as the next generation of leadership. Development needs of identified emerging leaders are now incorporated within the training and development plan as part of the employee’s PEP. As an example, targeted training is being provided quarterly to team leads across the organization to ensure foundational understanding, including team dynamics, difficult conversations, and team motivation.

LOTS has three key work processes within the work systems: Referral Management, Authorization, and Procurement/ Allocation (*Figure 6.1-2*). Referral Management, the first key process in both work systems, is measured by organ and tissue referrals. Referral is the start of collaboration; hospital satisfaction with the donation is reflected in *Figures 7.1-1A and 7.1-2A*. Organ referrals (*Figure 7.1-1*) have experienced organizational best levels in 2018. Tissue referrals have increased, allowing LOTS to achieve “tenth in the nation” status in 2018 (*Figure 7.1-2*). (GPR is a national organization providing comparative satisfaction and engagement data.)



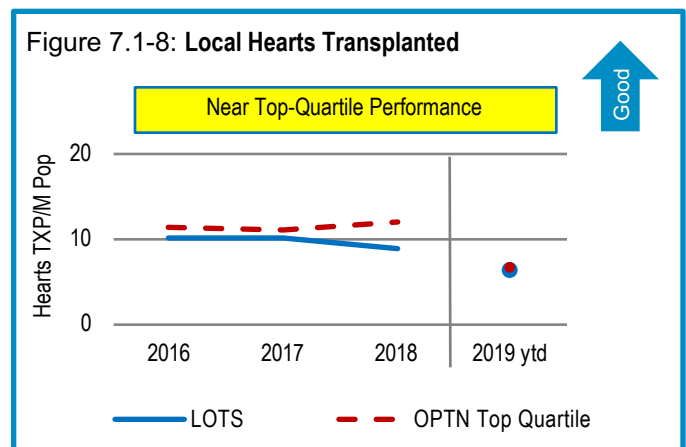
The key outcome measurement for authorization in the OWS is organ donors (*Figure 7.1-3*) and organ authorization (*Figure 7.1-17*), and the authorization outcome measure in the TWS is tissue donors (*Figure 7.1-4*). Organ donor numbers remain high. Tissue donor numbers have remained steady over the last three years, meeting the industry comparative.

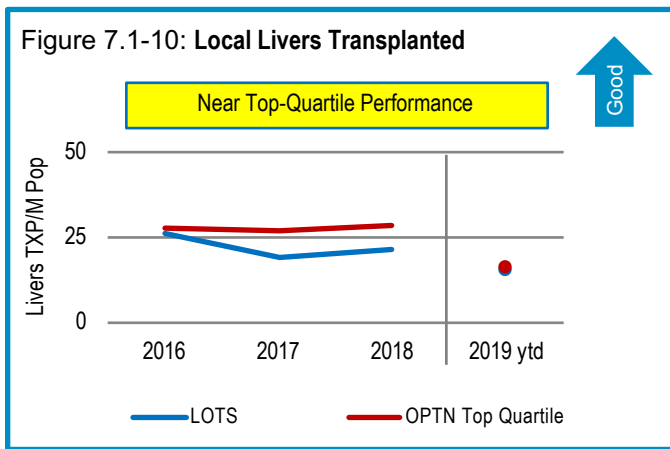
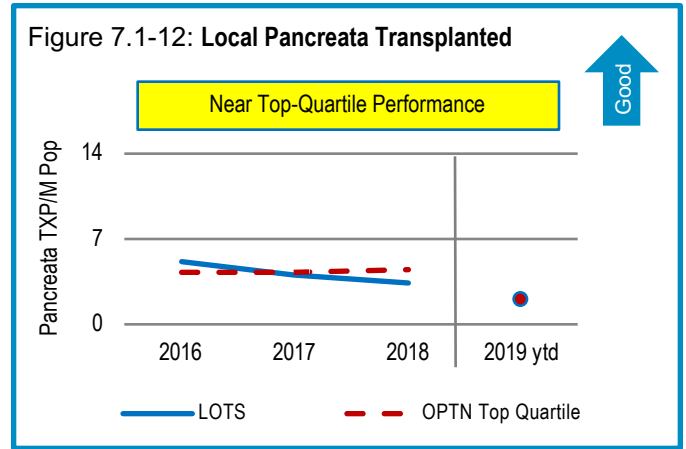
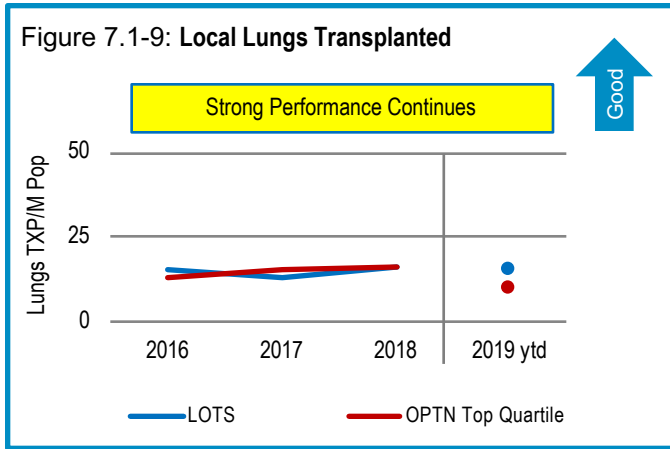
The last key process of both work systems is procurement, which is measured by local organs transplanted in the OWS (*Figure 7.1-5*). In the TWS, the measures are Age-Targeted Bone Donors Released (*Figure 7.1-6*) and Skin Donors Released (*Figure 7.1-7*). Local organs transplanted are a topline



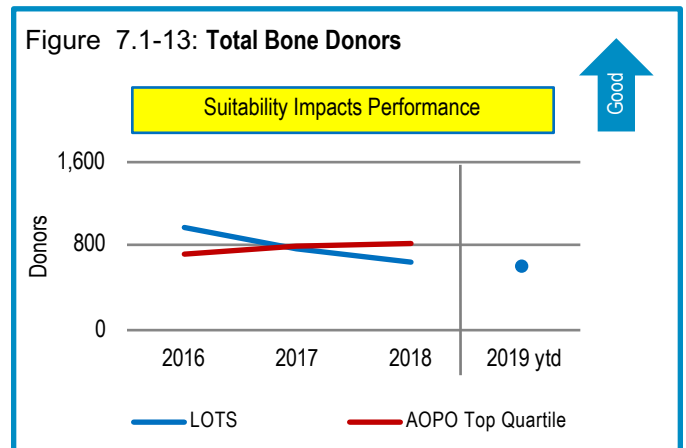
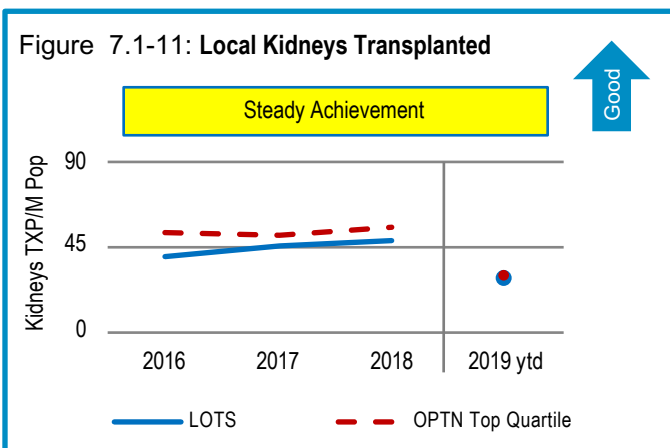
measure directly responsible for increasing lives saved. Local organs transplanted positions LOTS at the national top quartile. Age-targeted bone donors released show a favorable trend; skin donors released, a more recently added metric, exceeds the internal target for 2018 and shows a beneficial trend.

The two work systems include two service lines that are segmented into two customer groups: local organ transplant centers and tissue processors (*Figure P.1-6*). The organs transplanted can be segmented by organ type: heart, lung, liver, kidney, and pancreas, and results are shown by organs transplanted per million (*Figures 7.1-8, 7.1-9, 7.1-10, 7.1-11,*

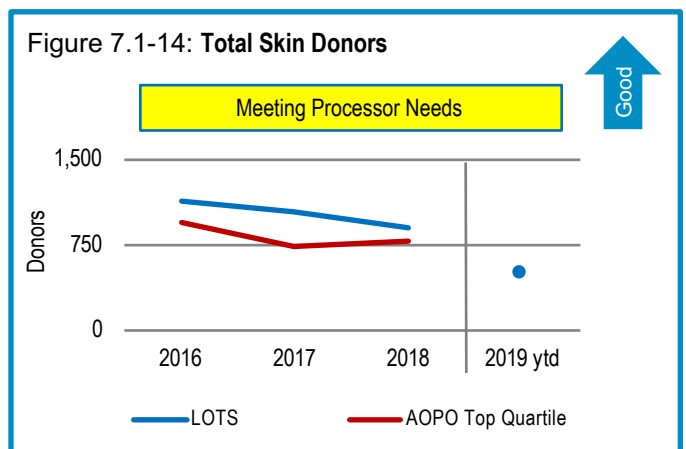




with steady improvement since 2017. Pancreata transplanted per million remains near top-quartile performance. Tissue donors can be segmented by bone donors ([Figure 7.1-13](#)) and skin donors ([Figure 7.1-14](#)). Bone and skin donor numbers have been impacted by the opioid epidemic, resulting in decreased suitability, and processor limits have also resulted in decreases.



and 7.1-12). In 2018, there was an increase in Hepatitis C+ donors and Public Health Services (PHS)-increased risk donors, which limited growth in results. To help increase the number of hearts transplanted, LOTS is involved in a heart research project to improve heart function. Local lungs transplanted per million places LOTS in the top quartile in 2018. Livers transplanted per million remains steady, nearing the top quartile. Kidneys transplanted per million remains steady,

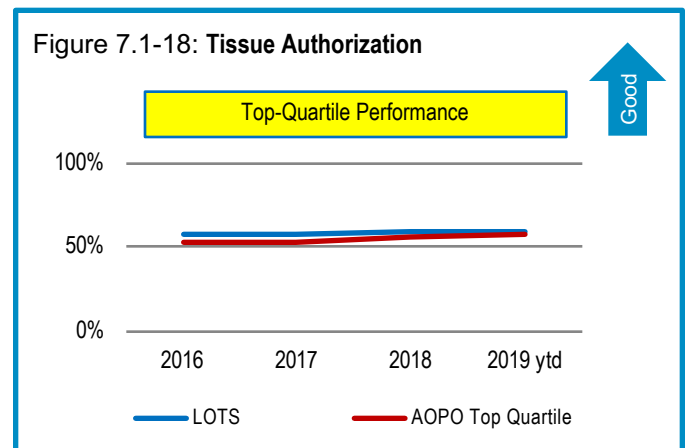
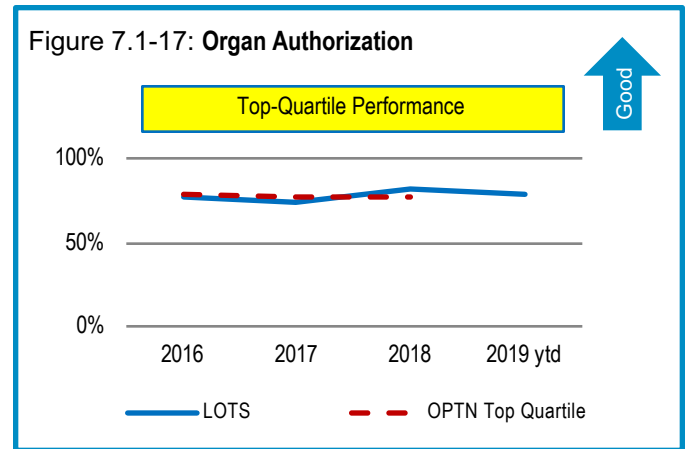
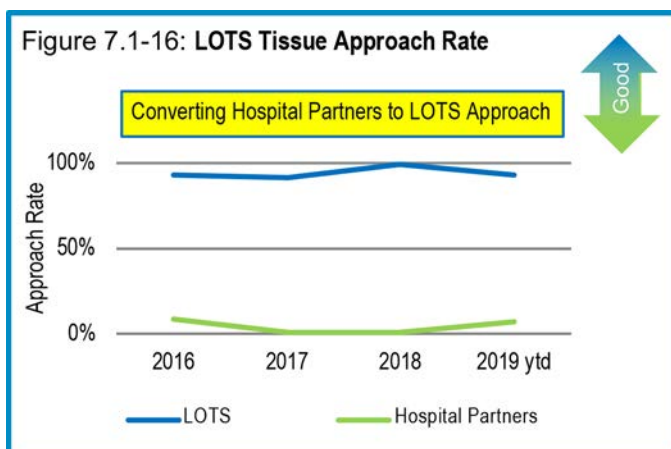
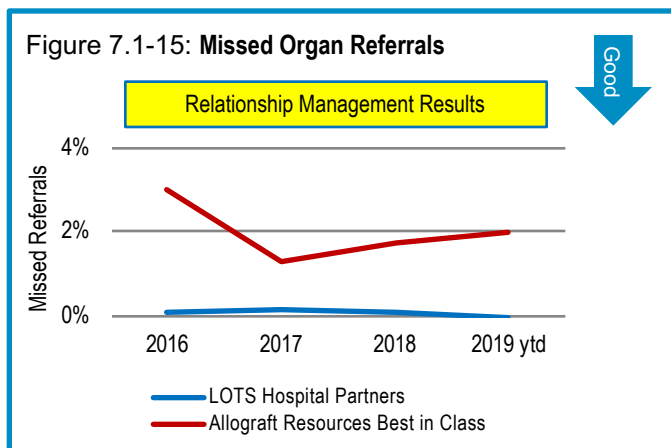




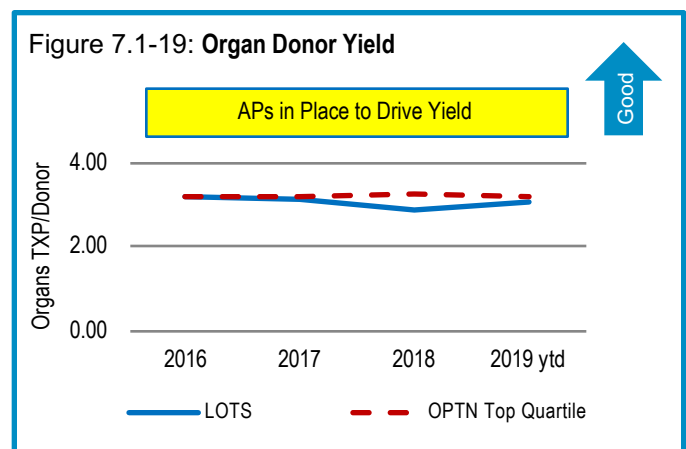
## 7.1b Work Process Effectiveness Results

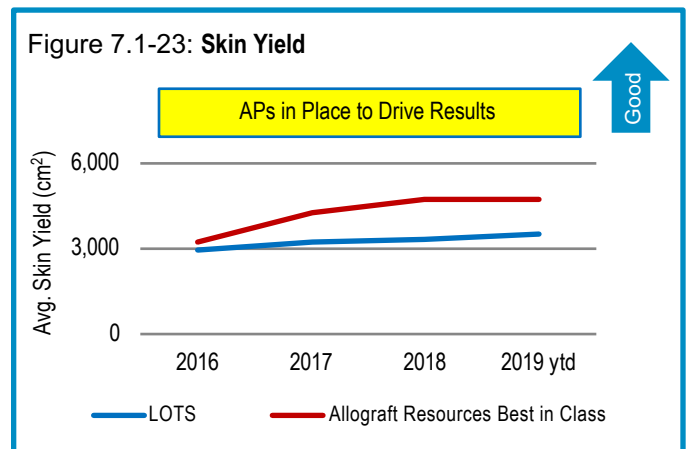
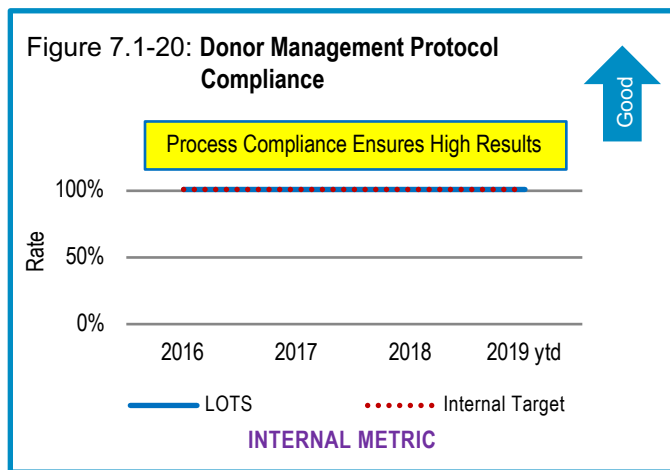
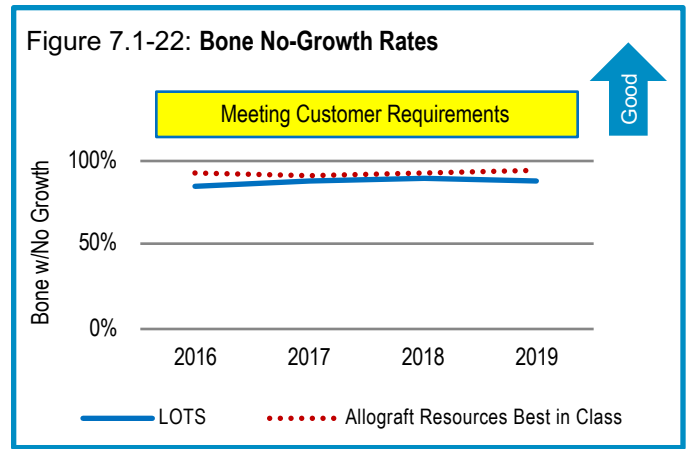
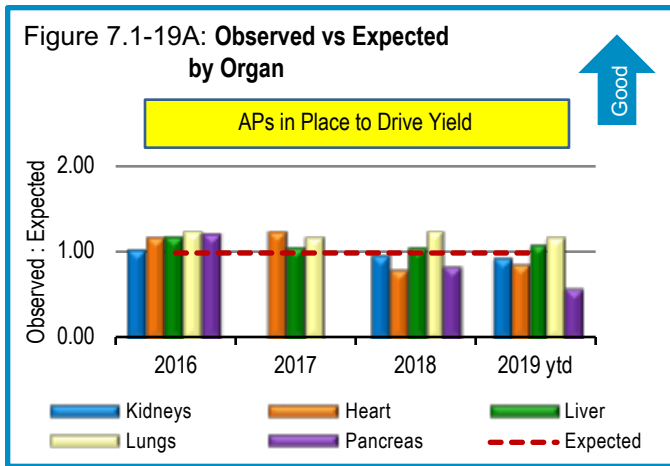
**7.1b(1)** LOTS’s key process effectiveness and efficiency results are noted in *Figure 6.1-2* as “in-process measures.” The relationship management efficiency and effectiveness results for OWS are missed organ referrals (*Figure 7.1-15*). Missed referrals have remained at or under 2% since 2016. For TWS, the relationship management in-process measure is the percentage of approaches by LOTS (*Figure 7.1-16*). Hospital Services staff have worked closely with hospital partners to transition the Tissue Authorization Process to the LOTS Communication Center department. In 2018, LOTS performed the approach for tissue authorization at 99% of the hospitals, an increase of nearly 8% in the last three years.

The authorization in-process measure for OWS is the organ authorization rate (*Figure 7.1-17*), which shows steady performance. The TWS in-process authorization measure is the tissue authorization rate (*Figure 7.1-18*). Breakthrough process changes implemented, combined with new job requirements, hiring practices, and workforce development and training, have resulted in tissue authorization outcomes exceeding the industry top quartile.



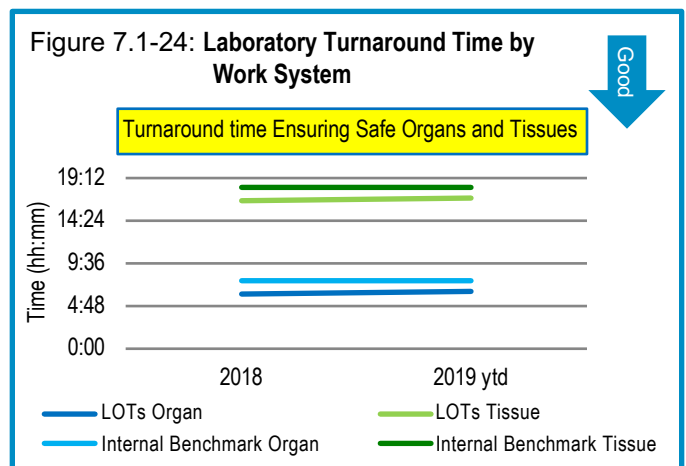
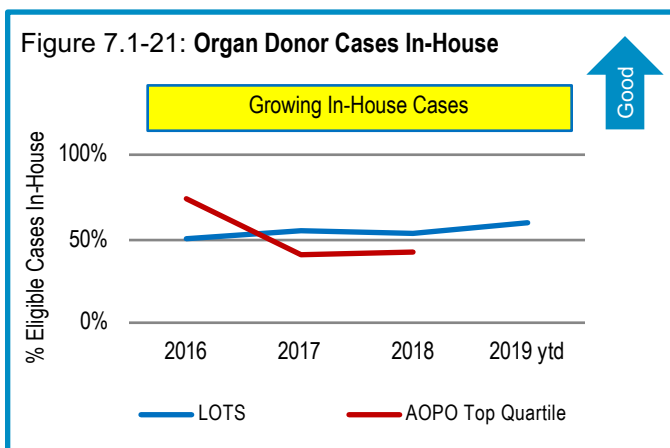
The in-process measures for procurement are listed in *Figure 6.1-2*. Optimizing the gift (yield; *Figure 7.1-19*) is demonstrated in the OWS by the ability of the clinical staff to manage the donor’s clinical status to ensure the highest number of transplantable organs. Yield was impacted in 2018 by an organizational record of DCD donors and an increase in Hepatitis C+ donors and PHS-increased risk donors. Despite those challenges, LOTS’s observed performance exceeds expected results with lungs (*Figure 7.1-19A*). Donor Management Protocol Compliance (*Figure 7.1-20*) continues to show 100% compliance and represents the ability of the clinical organ staff to manage donors effectively. Organ Donor Cases

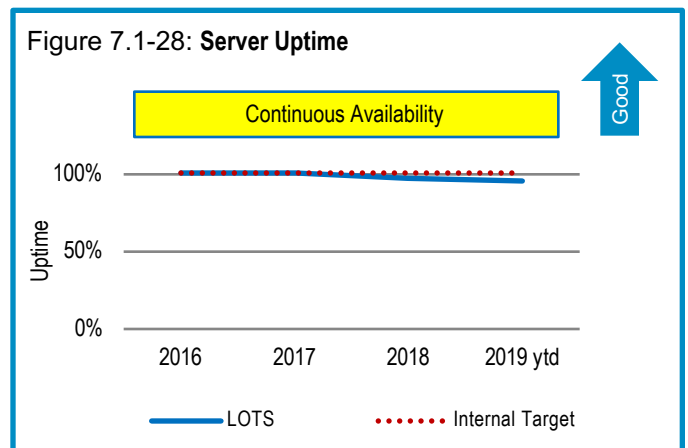
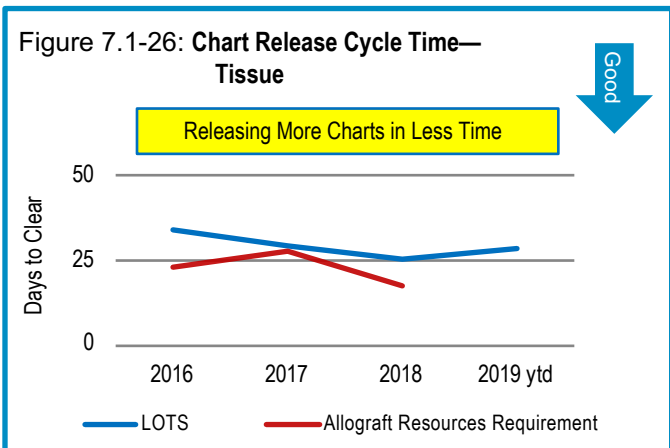
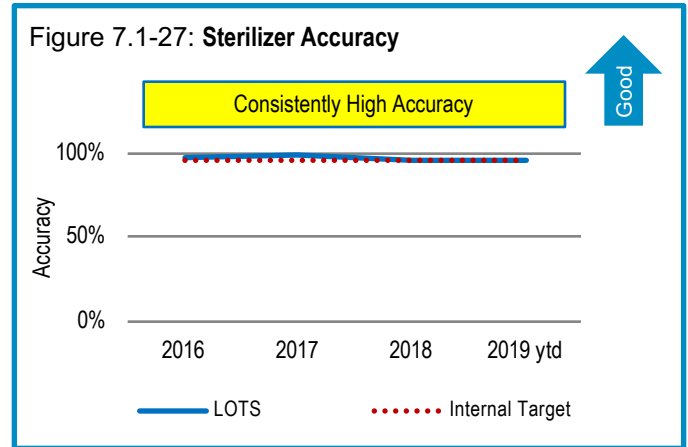
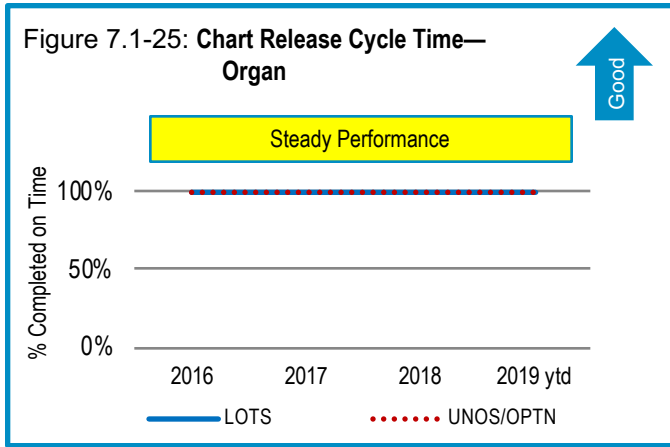




In-House ([Figure 7.1-21](#)) is the practice responsible for creating significant cost savings and customer satisfaction. This is a partner/customer satisfier for the donor hospitals and the transplant centers. LOTS outperforms the external benchmark comparisons with organizational high outcomes for 2019. The TWS procurement in-process measures include bone no-growth and skin yield. LOTS met the Allograft Resources partner benchmark for Bone No-Growth Rates ([Figure 7.1-22](#)). Skin Yield ([Figure 7.1-23](#)) shows favorable trends; APs were developed to address benchmark performance gaps.

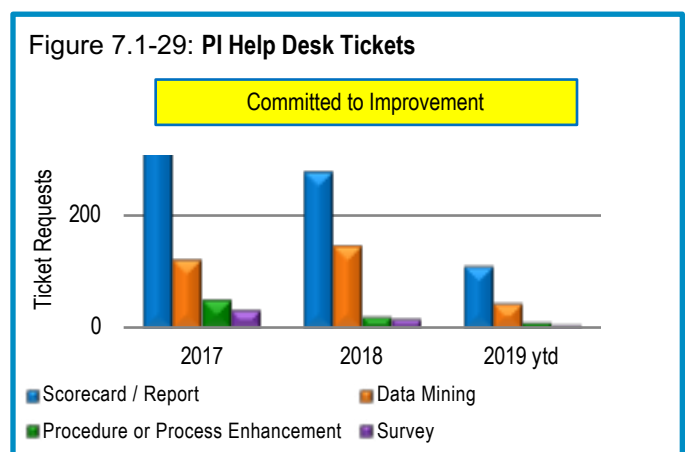
The key organizational performance indicators for key support processes are shown in [Figure 7.1-27 through Figure 7.1-33](#). Laboratory testing turnaround time ([Figure 7.1-24](#)) has seen steady performance, with LOTS meeting its internal benchmark. Chart Release Cycle Time—Organ ([Figure 7.1-25](#)) has seen steady performance in the number of days needed for organ charts to be reviewed and uploaded to meet regulatory requirements. Chart Release Cycle Time—Tissue ([Figure 7.1-26](#)) reflects a critical step in the TWS Process during which charts are completed, quality checked, and released to the processors,





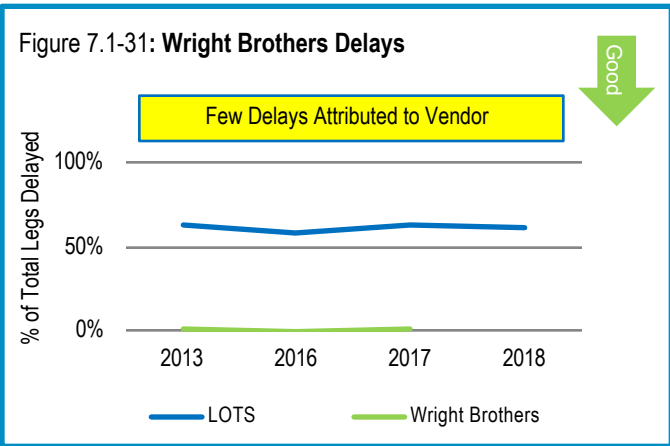
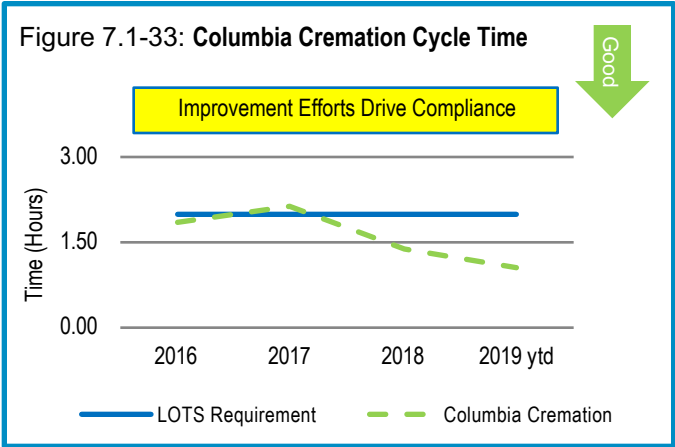
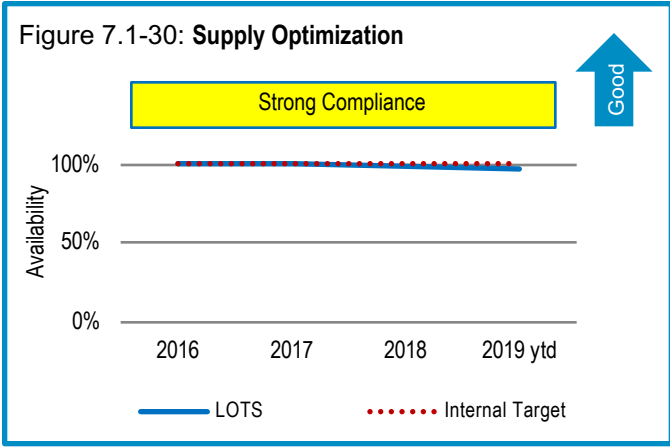
fulfilling a tissue processor requirement and triggering reimbursement to LOTS. The tissue chart cycle time is meeting or exceeding the Allograft Resources partner requirement. Sterilizer Accuracy (*Figure 7.1-27*) shows the documentation compliance that impacts clinical equipment availability. IT management (*Figure 7.1-28*) continuously shows the ability of the IT department to have server availability 24/7 in order to support business operations. As seen in *Figure 7.1-29*, process improvement is an indicator of PI utilization across the company and shows consistent use over the last three years. Quality Compliance Management (*Figure P.1-5*) highlights LOTS’s accreditation results in voluntary and required certifications, meeting or exceeding FDA, UNOS, AOPO, and AATB requirements.

**7.1b(2)** Emergency preparedness actions taken to minimize interruptions in the delivery of LOTS’s services are AOS.



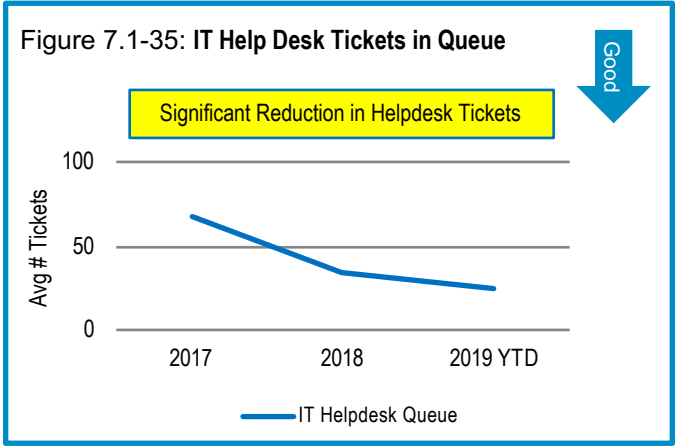
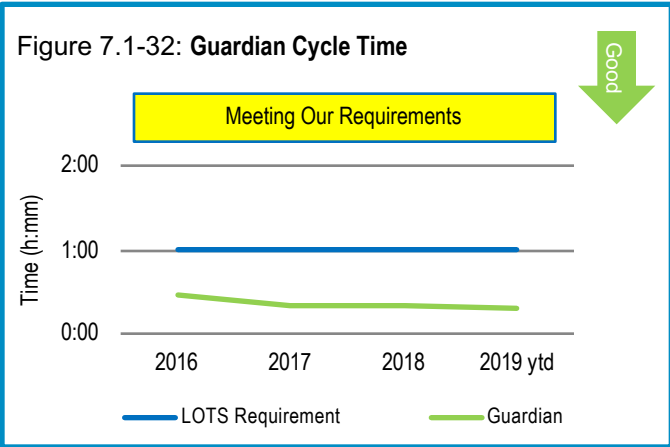
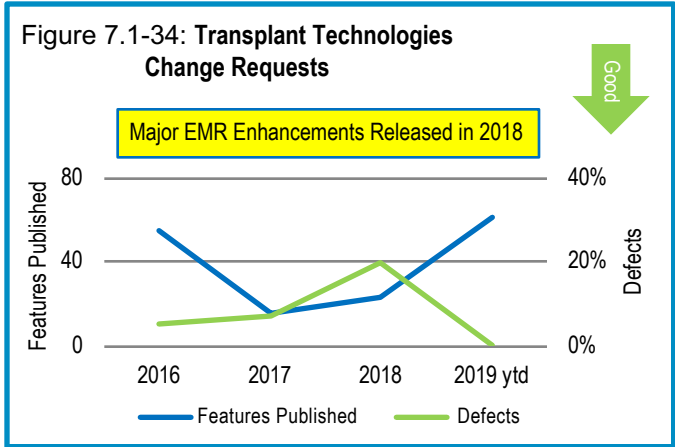
### 7.1c Supply-Network Management Results

Supply Optimization (*Figure 7.1-30*) via an electronic inventory system has resulted in 97% availability for supplies for all in-house cases. Wright Brothers Charters, a key supplier, provides air service logistics for donation activity outside of the Columbia, NT, metropolitan area. Wright Brothers provides 24/7 access to aircraft with a 90-minute launch requirement, and as demonstrated in *Figure 7.1-31*, delays due to provider issues occurred in less than 5% of the 260-plus



numbers of major releases with complex features in 2018 that exposes more opportunities for defects. Transplant Technologies continues to work with LOTS to resolve opportunities in a timely manner (*Figure 7.1-34*). Titan Technologies, a recently added key supplier, has managed to reduce the number of open IT Help Desk Tickets in Queue (*Figure 7.1-35*).

launches annually. Guardian Ambulance exceeds requirements 100% of the time (*Figure 7.1-32*). Columbia Cremation, another key supplier, has seen improvements since 2016, exceeding delivery time requirements in 2018 (*Figure 7.1-33*). Transplant Technologies, a key supplier, has seen increasing

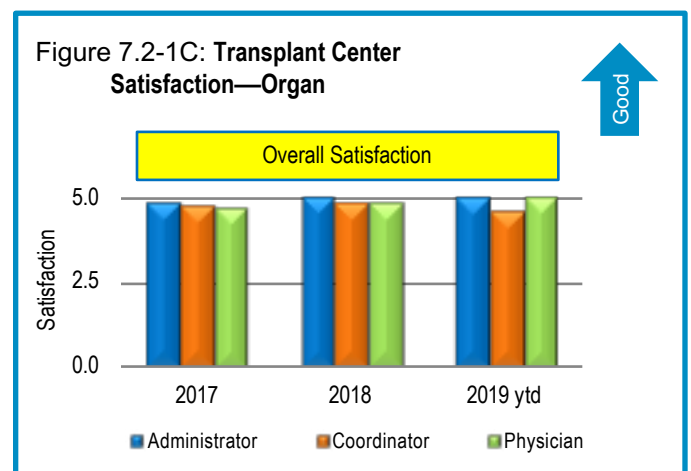
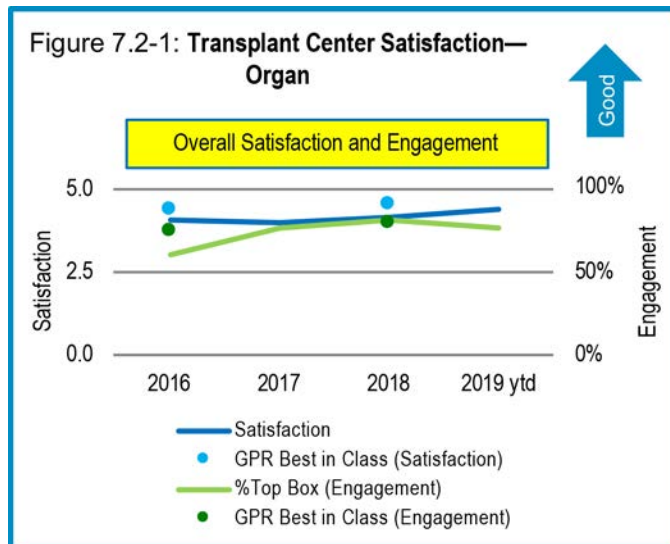
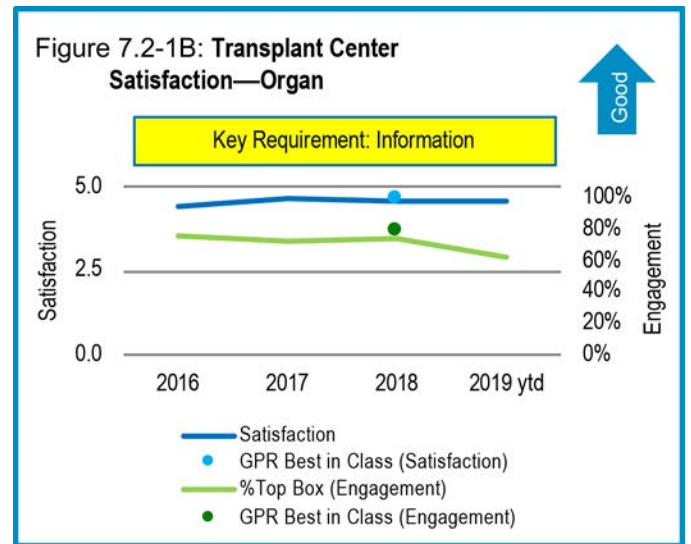
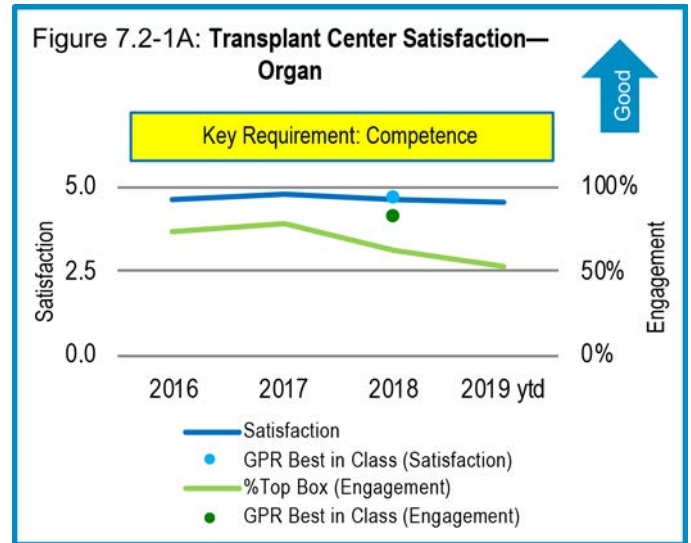


## 7.2 Customer Results

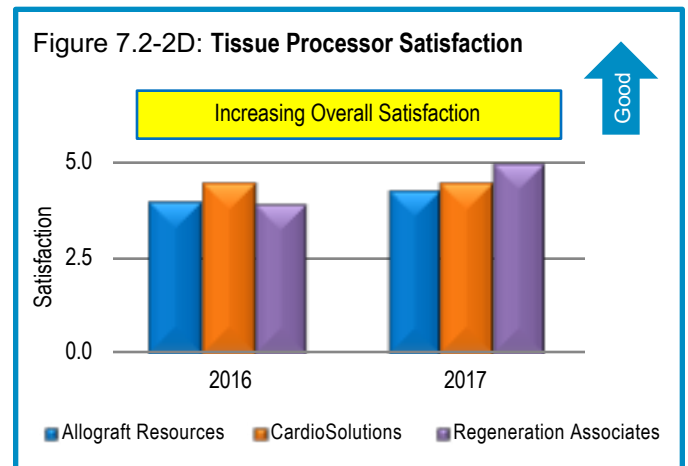
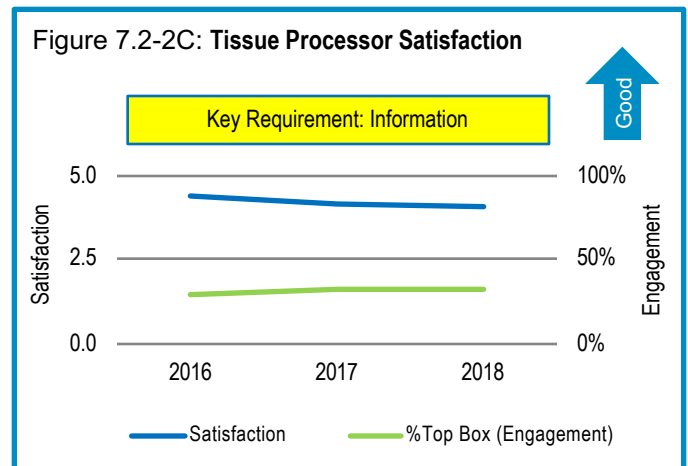
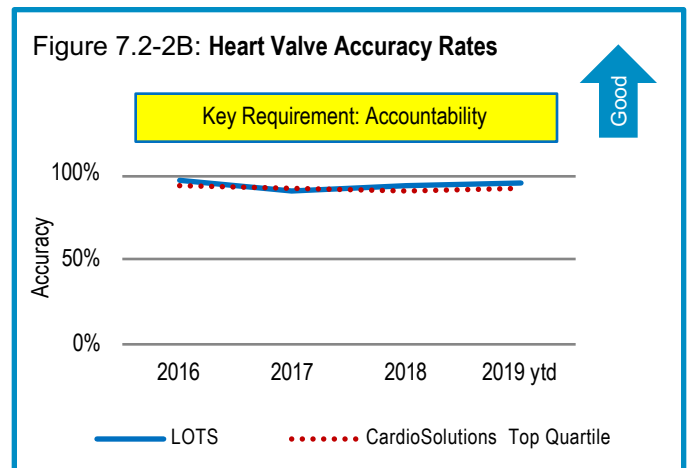
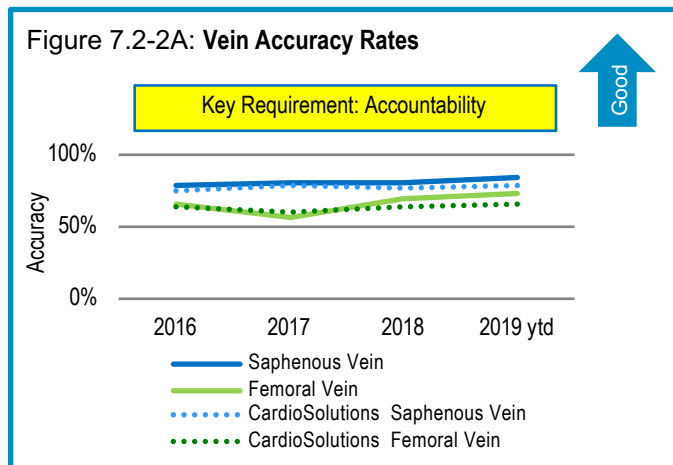
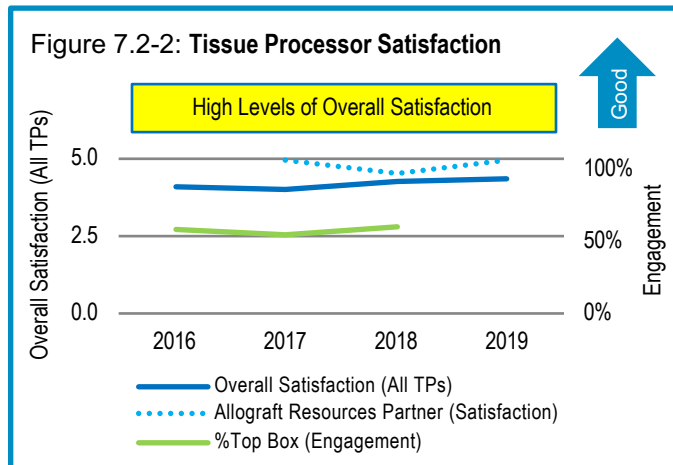
### 7.2a Customer-Focused Results

**7.2a(1)** As the federally designated OPO within its service area, LOTS does not have organ procurement competitors. Regardless, maximizing customer satisfaction and engagement is an organizational goal, and LOTS works closely with its customer groups to meet and exceed their requirements. Customer satisfaction data are gathered through the VOC methods as listed in [Figure 3.1-1](#), including the Customer Survey Process (AOS), which has undergone multiple cycles of learning and strategic improvement. (Key measures include overall satisfaction, and segmentation by customer group and service line are AOS.)

Overall satisfaction levels with LOTS’s organ transplant centers ([Figure 7.2-1](#)) demonstrate performance that is equal to or exceeds the benchmark for the last three years. Local organ transplant center satisfaction, segmented by key requirement, shows strong performance in “competence” ([Figure 7.2-1A](#)) and “information” ([Figure 7.2-1B](#)). Customer satisfaction in meeting the third requirement, “maximize donation,” is not measured through surveys. Instead, operational results are utilized to gauge effectiveness in achieving this key customer requirement and SO ([Figure 7.1-5](#)). Organ transplant center satisfaction can be segmented by position, which includes Transplant Physician, Coordinator, and Administrator ([Figure 7.2-1C](#)), and shows strong results for 2018 in all three segments.

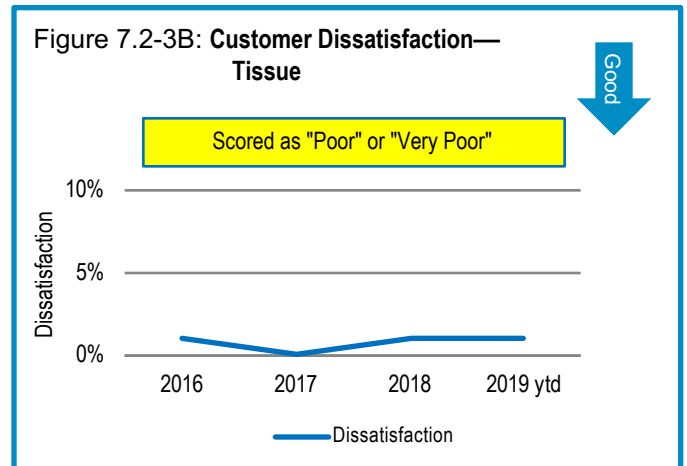
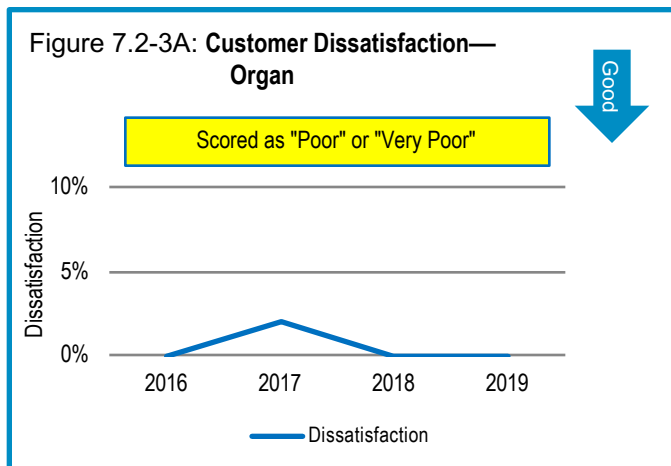
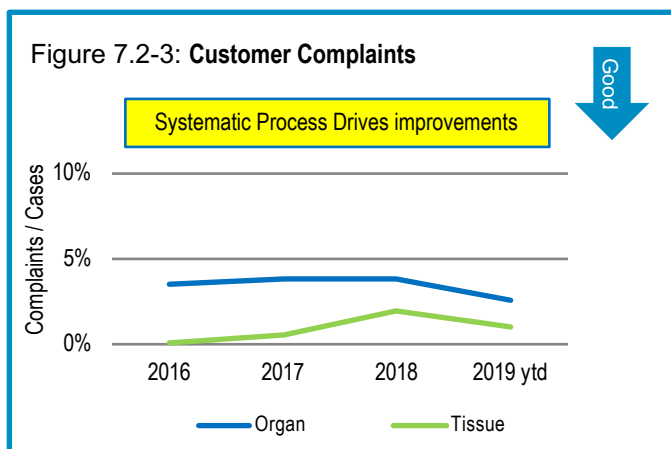


Satisfaction levels among LOTS's tissue processors (Figure 7.2-2) are critical to ensuring organizational success. Overall satisfaction demonstrates near high performance. Customer satisfaction meeting the first key requirement "accountability," defined as error rate minimization, is measured utilizing operational metrics reported via tissue processor scorecards (Figures 7.2-2A and 7.2-2B). When segmented by the key customer requirement of "information" (Figure 7.2-2C), results are consistently high. The third processor requirement is "maximize donation," which is tied to LOTS's tissue donation rates (Figure 7.1-4). Tissue processor satisfaction can be segmented by individual processor (Figure 7.2-2D). Satisfaction by processor has remained strong; 2019 year-to-date results show beneficial trends for all processors. APs are in place for 2019 that target specific areas for focus to continue exceptional results. Full segmented results by customer and service line are AOS.



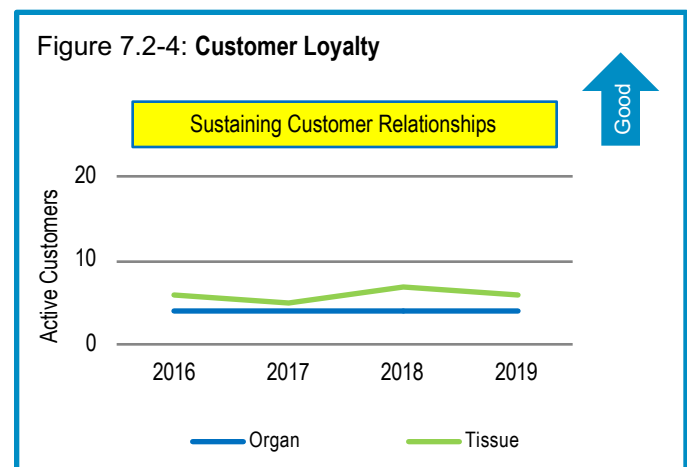
To determine dissatisfaction levels with local organ transplant centers and tissue processors, LOTS analyzes data obtained through the Customer Complaint Process (Figure 3.2-2). Despite an increase in the number of organ and tissue donors, the percentage of customer complaints for the two customer groups has demonstrated favorable trends (Figure 7.2-3). The implementation of a formalized CAPA system provides standardization and allows for systematic evaluation of complaints regardless of where they occur within the customer life cycle.

In addition to complaints, LOTS utilizes customer survey data to measure dissatisfaction by determining the percentage of poor and very poor responses (scores of 1 or 2) on customer surveys. Results for organ and tissue are at or near 0%, with both maintaining low trends since 2016 (Figures 7.2-3A and 7.2-3B).



**7.2a(2)** To identify levels and trends in customer engagement, LOTS calculates the percentage of very satisfied or top-box scores (perfect 5 out of 5) on its customer satisfaction scores. This methodology is based upon *The Loyalty Effect* (Fred Reichheld), which theorizes that relationship strength is directly related to customer loyalty and engagement (3.2). LOTS has maintained consistent levels of engagement with its local organ transplant centers (Figure 7.2-1). Tissue processor engagement results have demonstrated favorable trends since 2016 (Figures 7.2-2).

To assess its performance in building customer relationships, LOTS analyzes its number of active customers (Figure 7.2-4). The organ service line operates in a noncompetitive service area designated by the federal government, so the number of local organ transplant centers has not changed in 15 years. In the tissue service line, LOTS maintains contractual agreements with its tissue customers and expanded its customer base at the end of 2017 and into 2018.

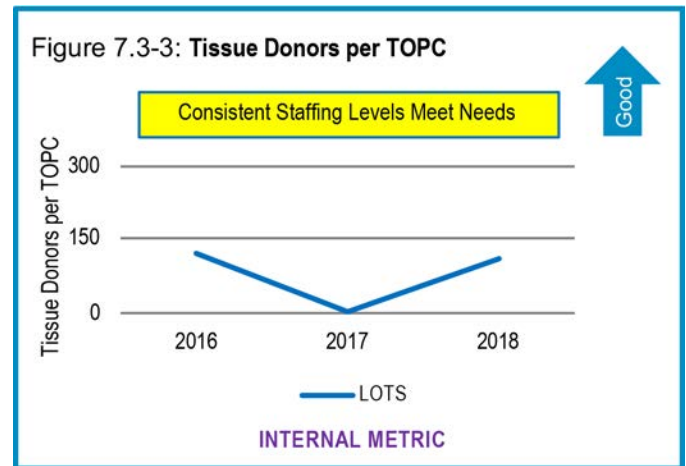
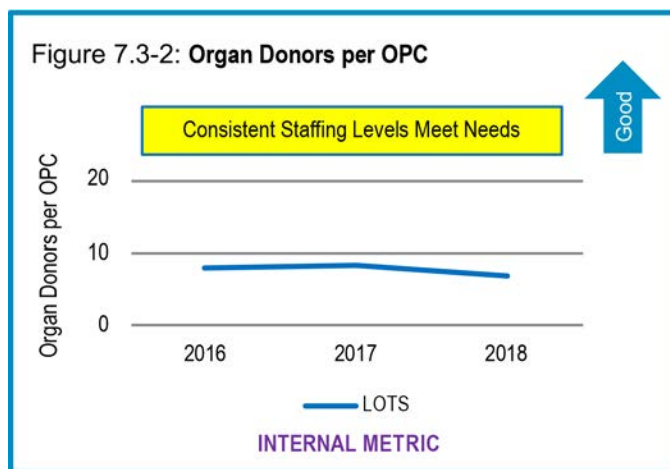
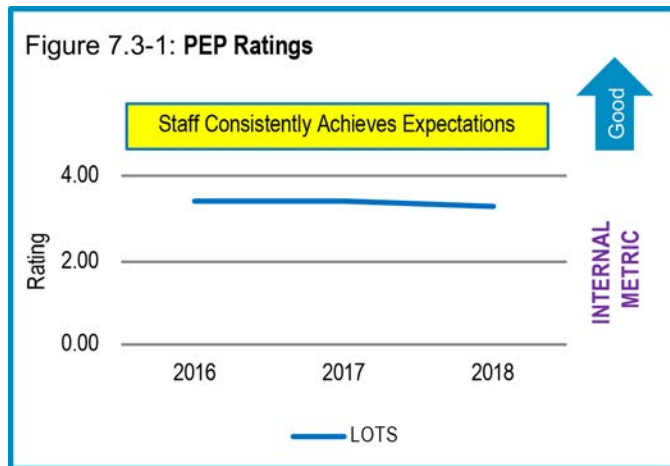


## 7.3 Workforce Results

### 7.3a Workforce-Focused Results

**7.3a(1)** Workforce C&C key measures and results are shown in *Figures 7.3-1 through 7.3-4*. The PEP ratings (*Figures 5.1-2 and 7.3-1*) illustrate the average performance evaluation score for the LOTS workforce, which is measured on a four-point scale. Through the implementation of an outcome-based performance evaluation tool, PEP rating results indicate that the majority of the workforce “achieve expectations,” therefore meeting the organization’s capability needs. LOTS maintains adequate capacity for the OWS through evaluation of organ donors per the OPC (*Figure 7.3-2*). Within the TWS, evaluation of workforce capacity is assessed at quarterly C&C meetings by ongoing comparison of the number of tissue donors to the number of TOPC staff members (*Figure 7.3-3*).

Workforce Growth (*Figure 7.3-4*) demonstrates continued staffing levels and stable New Hire Diversity (*Figure 7.3-4A*) over the past three years as services have expanded.

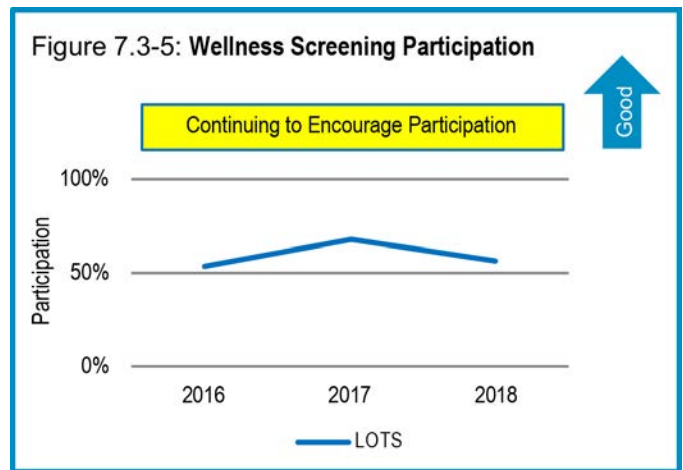




**7.3a(2)** Workforce climate measures are key to retaining a mission-driven workforce (CC) and do not differ by diversity of the workforce or work group. Workforce health, safety, and security, as well as employer-provided services and benefits, are monitored continuously to ensure effectiveness.

In an effort to exhibit concern and care for the employees as well as engage employees in the topic of personal health, a wellness program was initiated in 2009. The wellness program participation remains strong (*Figure 7.3-5*). LOTS takes great care in ensuring that all employees are trained upon hire and annually thereafter on proper procedures and safety protocols in each position and department. Workplace Preparedness (*Figure 7.3-6*) demonstrates multiple efforts deployed to ensure the safety of the workforce. As a result of the organization's dedication to adherence to safety procedures and protocols, LOTS monitors its DART rate (Days Away/Restricted/Transferred Rate) due to workplace injuries (*Figure 7.3-7*).

Radiation Exposure (*Figure 7.3-8*) rates are used to assess the amount of radiation organ clinical staff members are exposed to when utilizing imaging equipment. LOTS policies and procedures ensure that employees are safe from radiation exposure.



Multiple security measures are in place to create the most secure environment for the workforce (*Figure 7.3-9*).

The organization has consistently shown commitment to the health and satisfaction of its employees by continuing to offer rich benefits plans in medical, dental, vision, and life coverage, as well as additional benefits as shown in Benefits Expenditures (*Figure 7.3-10*).

Preparations	Goal	2016	2017	2018	2019 YTD
Safety Training	All Employees	100%	100%	100%	100%
Fire Alarm Testing	Quarterly	4	4	4	3
Aero Charter Safety Training	All Aplicable Employees	100%	100%	100%	100%
Generators and System Availability Testing	Weekly	100%	100%	100%	100%
Injury Investigation	All Injuries	100%	100%	100%	100%
Data/VOIP (Communication) Testing	Real Time	100%	100%	100%	100%

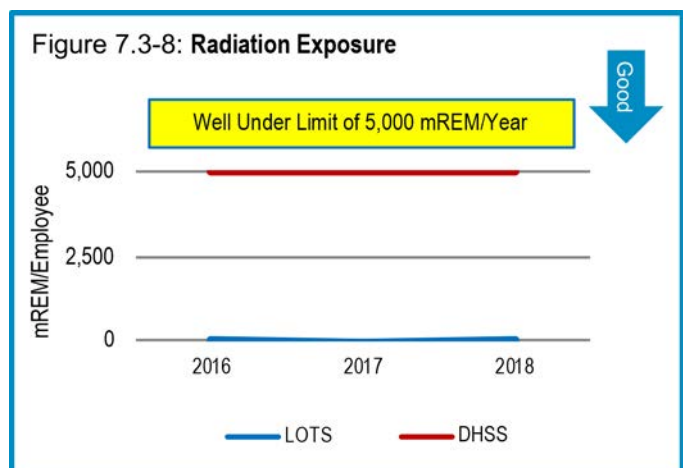
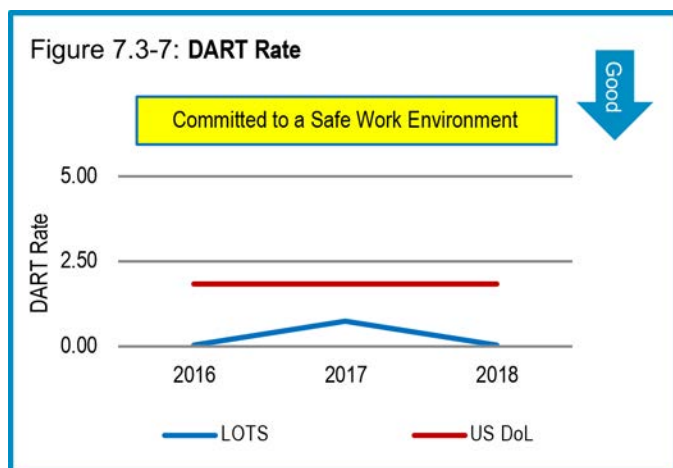
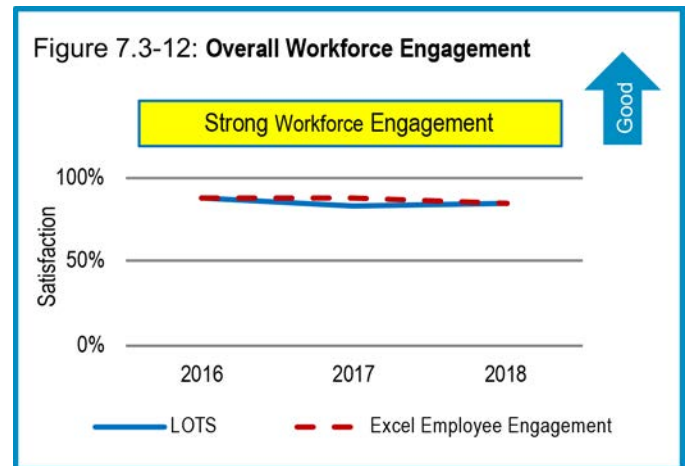
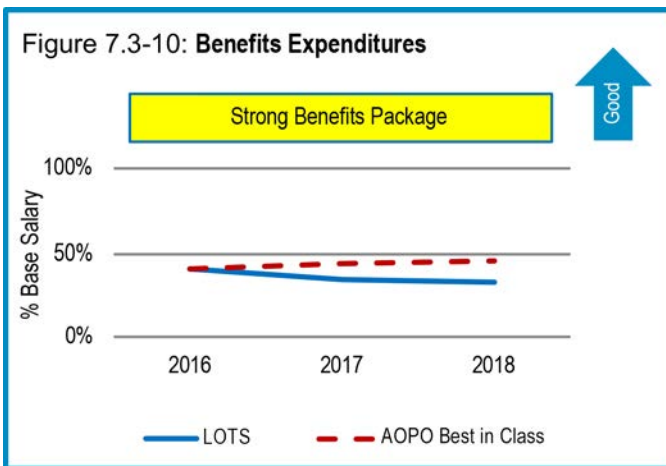


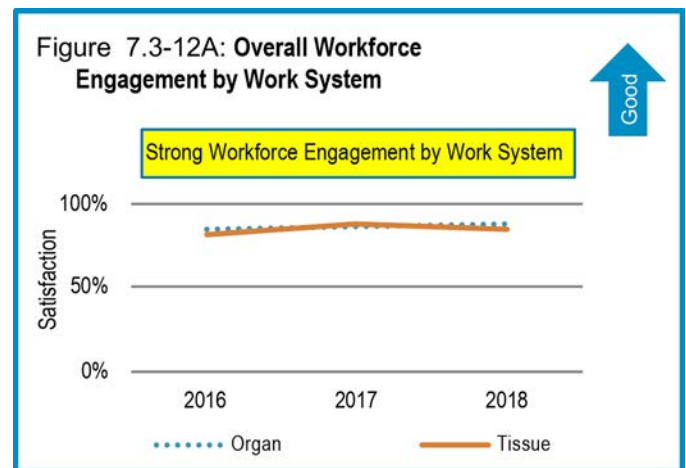
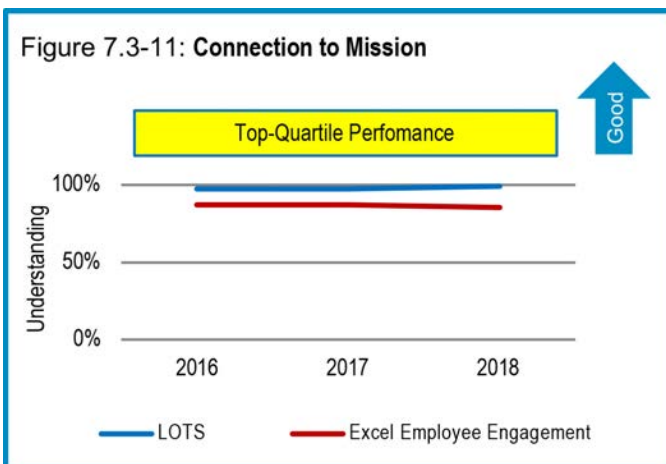
Figure 7.3-9: Security Measures

Preparations	Goal	2016	2017	2018	2019
Security Alarm Surveillance	24/7	24/7	24/7	24/7	24/7
Motion-Sensored Lighting	24/7	24/7	24/7	24/7	24/7
DVR-Monitored Security Cameras	24/7	24/7	24/7	24/7	24/7
Monitored Panic Buttons (Vendor)	24/7	24/7	24/7	24/7	24/7
Badge Access Required	★	★	★	★	★
Secure Parking	24/7	NA	24/7	24/7	24/7

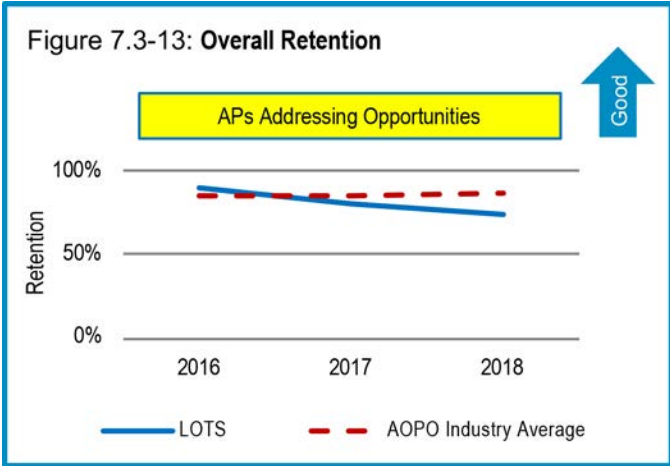
★ In Compliance



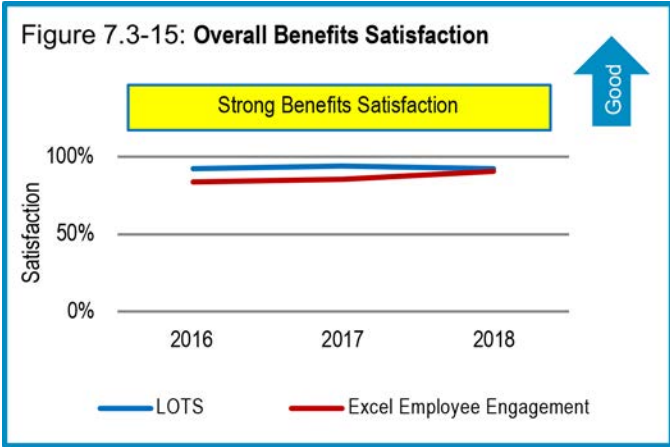
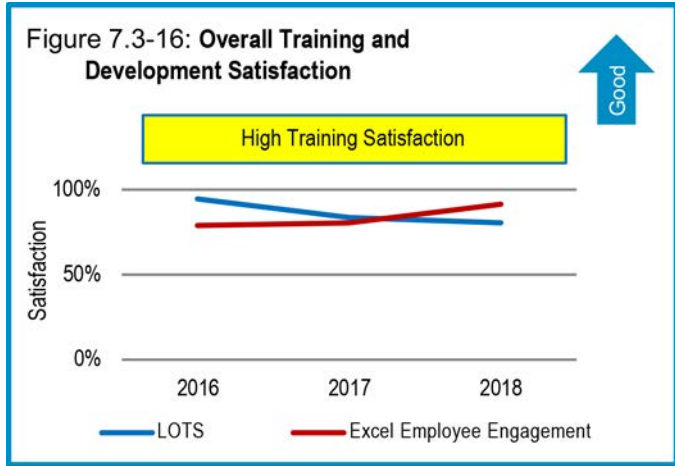
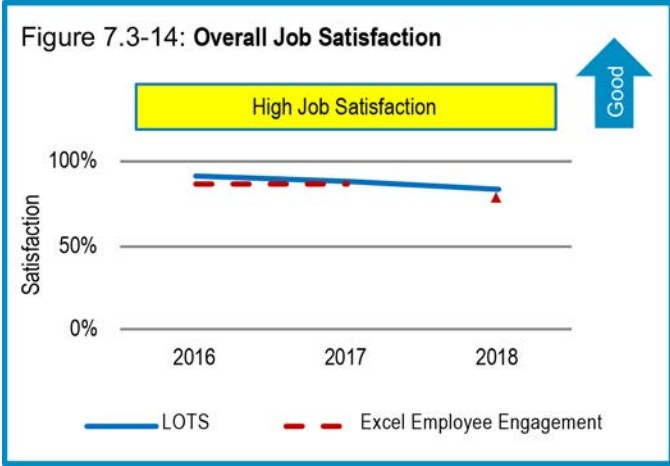
**7.3a(3)** Essential to the workforce climate, and a key contributor to employee engagement, is the connection to the organization’s mission. On workforce surveys, staff members repeatedly indicate an exceptional level of understanding of how their individual positions contribute to the mission, exceeding health care median performance (*Figure 7.3-11*). Results in the Excel Employee Engagement survey assessing the organization’s overall engagement exceed the health top-quartile benchmark. In addition, segmentation by work system demonstrates strong engagement scores in both the tissue and organ work systems (*Figure 7.3-12A*).



LOTS continues to have consistent organizational retention; departmental APs are in place for 2018 to address opportunities (*Figure 7.3-13*). Over the last several years, LOTS has focused on ensuring workforce satisfaction. Overall workforce satisfaction survey results show a sustained trend and favorable comparison to the external benchmark (*Figure 7.3-14*). Overall benefits satisfaction (*Figure 7.3-15*) shows strong results, equal to the health care industry top quartile.



**7.3a(4)** LOTS supports the training and development of the entire workforce, as seen in Overall Training and Development Satisfaction (*Figure 7.3-16*) and LOTS’s financial investment in training expenditures per full-time equivalent (FTE; *Figure 7.3-17*). LOTS also measures levels and trends in leader development through the annual workforce survey. *Figure 7.3-18* shows leader results indicating satisfaction with employer-sponsored training and development meeting the industry top quartile.



## 7.4 Leadership and Governance Results

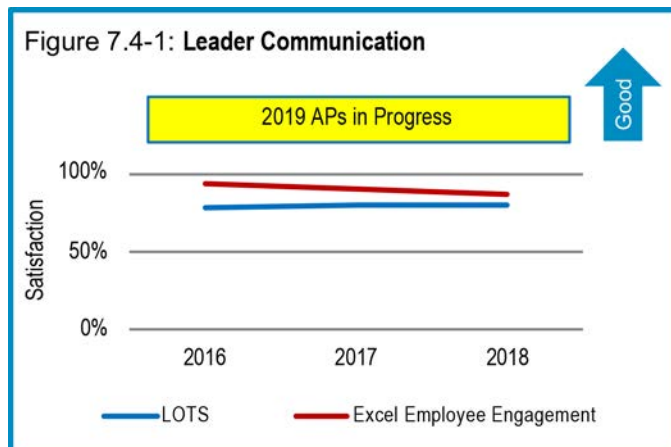
### 7.4a Leadership, Governance, and Societal Contribution Results

**7.4a(1)** Leader Communication (*Figure 7.4-1*) reflects senior leader communication with the workforce. Communication has remained steady, and there are multiple APs in place in 2019 to continue to drive performance to exceed top-quartile benchmarks.

**7.4a(2)** LOTS Board Self-Assessment (*Figure 7.4-2*) compares favorably to the benchmark. Full survey data and resultant actions are AOS.

LOTS engages in multiple activities to ensure fiscal accountability, as listed in section 1.2a(1). As a nonprofit organization, an Audit Committee is not a requirement, but one was voluntarily established as a best practice in governance to expand fiscal accountability. External financial audits sanctioned by this committee have always achieved the highest rating of “unqualified” opinion (*Figure 7.4-4*).

**7.4a(3)** LOTS views accreditation and regulatory compliance as a baseline expectation for performance. The organization has received full accreditation from all voluntary accrediting bodies within its industry and has maintained this trend for several years. Additionally, LOTS maintains full compliance with regulatory and legal mandates that have been sustained since the organization’s inception (*Figure 7.4-3*).



**Figure 7.4-3: Regulatory & Legal Compliance Key Measures**

Measures & Indicators	Results
AATB Accreditation (3 years)	Full Accreditation
AOPO Accreditation (3years)	Full Accreditation
CMS Certification (4 years)	Full Certification
DHSS (3 years)	Full Compliance
DOR	No Adverse Findings
EEOC	0 Issues
FDA Approval	No Adverse Findings
FLSA	0 Issues
IRS Compliance	0 Issues
OSHA	Full Compliance
UNOS/OPTN (3 years)	Member in Good Standing

**Unblemished Performance**

**Figure 7.4-4: External Financial Audit**

Year	External Auditor	Determination
2013	Brother, Sister, & Auditor	Unqualified Opinion
2014	Brother, Sister, & Auditor	Unqualified Opinion
2015	Brother, Sister, & Auditor	Unqualified Opinion
2016	Brother, Sister, & Auditor	Unqualified Opinion
2017	Brother, Sister, & Auditor	Unqualified Opinion

**Excellent Fiscal Accountability**

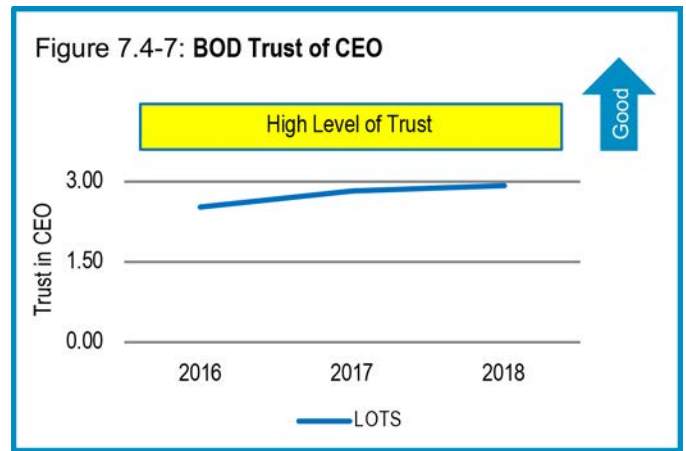
**7.4a(4)** The nature of LOTS’s business requires that the organization lives its core value of honesty and demonstrates social responsibility as indicated by key metrics related to ethical behavior. In addition, 100% of the BOD, LT, and workforce complete annual conflict-of-interest documentation. Ethical behavior is ensured by providing annual CCP training to all employees. Currently, 100% of the workforce and board is CCP-trained. Limited corporate compliance issues are noted in Report of Corporate Compliance Hotline Issues (*Figure 7.4-6*), which illustrates program effectiveness.

Stakeholder (BOD) requirements show a high level of satisfaction (*Figure 7.4-5*) based on the BOD evaluation of the CEO’s performance. Similarly, trust in leadership (CEO) by the BOD consistently meets or exceeds the organizational goal of 2.5 on a 3-point scale (*Figure 7.4-7*).

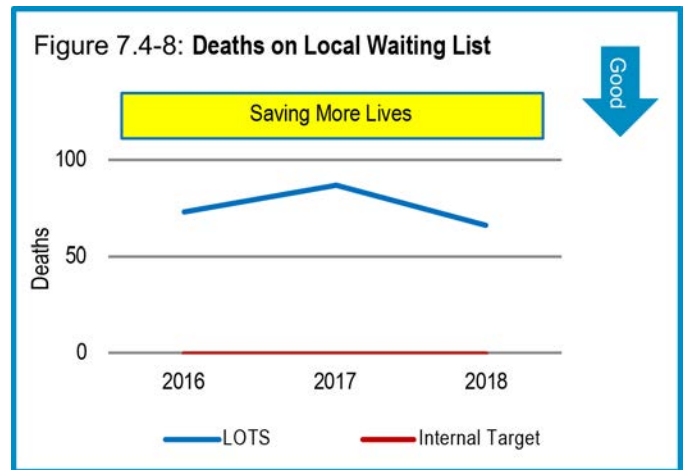


**Figure 7.4-6: Reported Corporate Compliance Hotline Issues**

Year	Results
2014	0 Complaints Reported
2015	0 Complaints Reported
2016	1 Complaint Reported
2017	1 Complaint Reported
2018	1 Complaint Reported
2019 YTD	4 Complaints Reported
Commitment to Integrity	



**7.4a(5)** A true measure of societal benefit is the reduction of deaths on the local waiting list as LOTS increases transplanted organs; this dynamic trend has impacted the community living within the DSA (*Figure 7.4-8*).

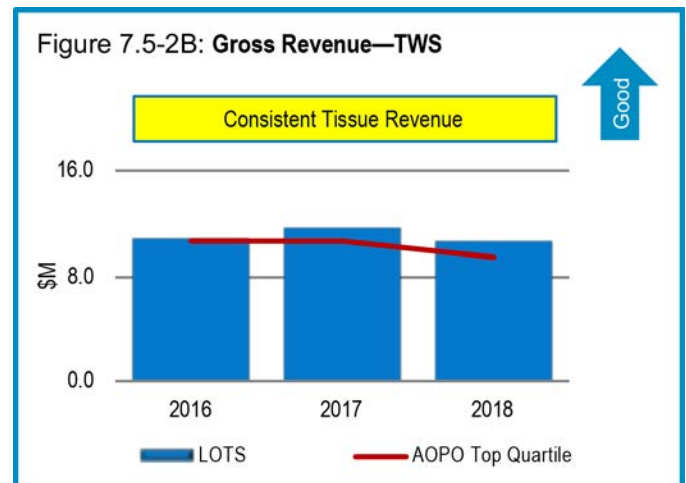
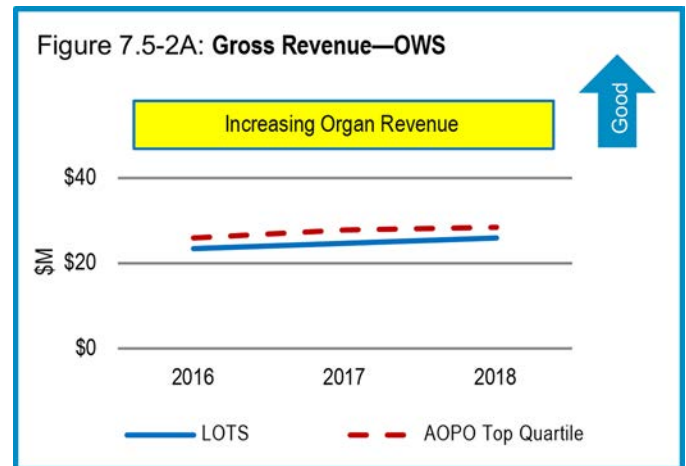


## 7.5 Financial, Market, and Strategy Results

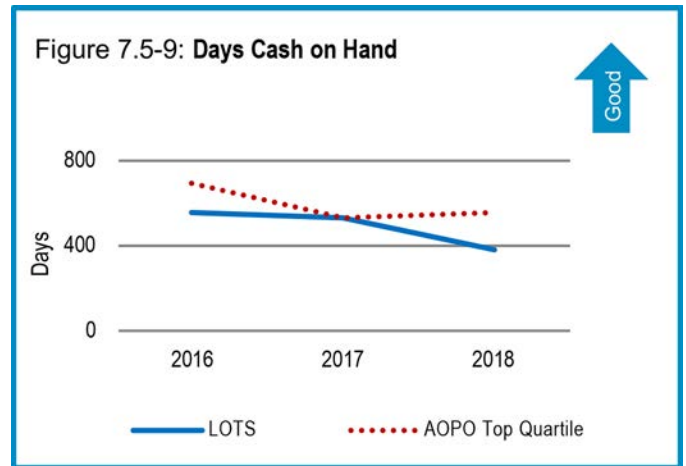
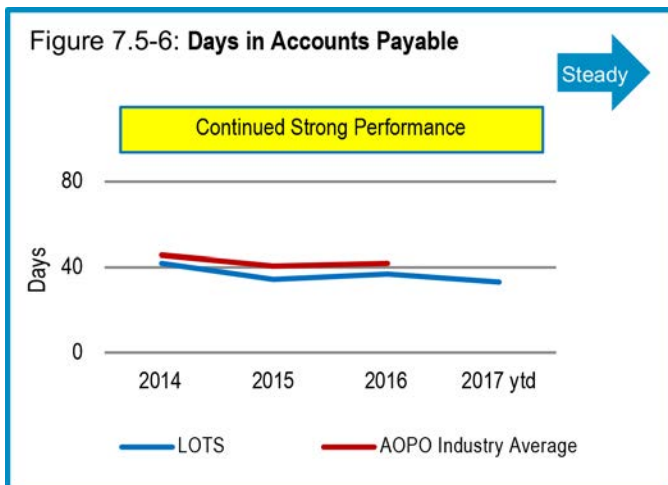
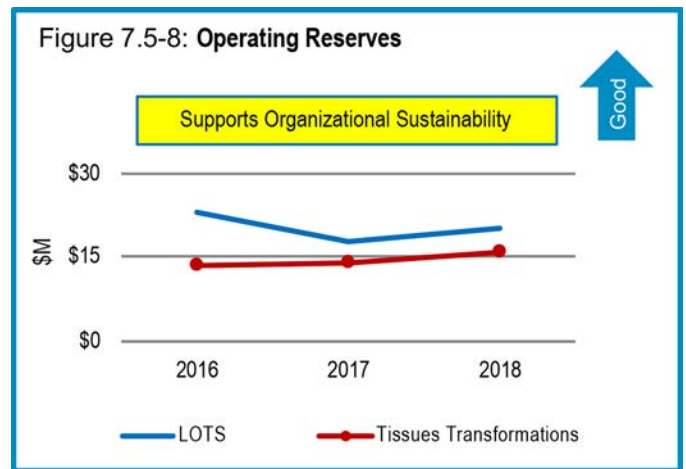
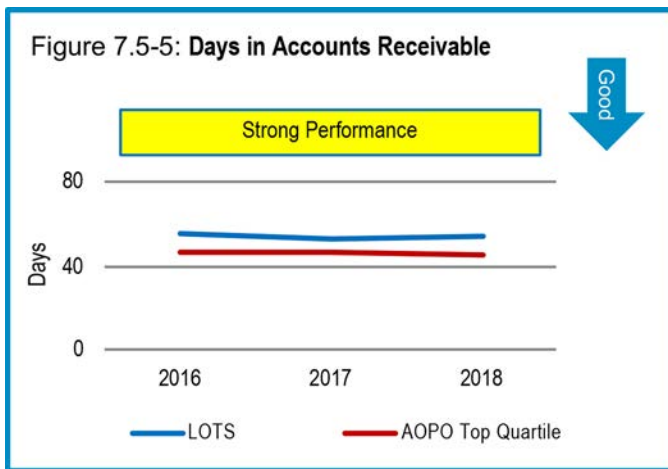
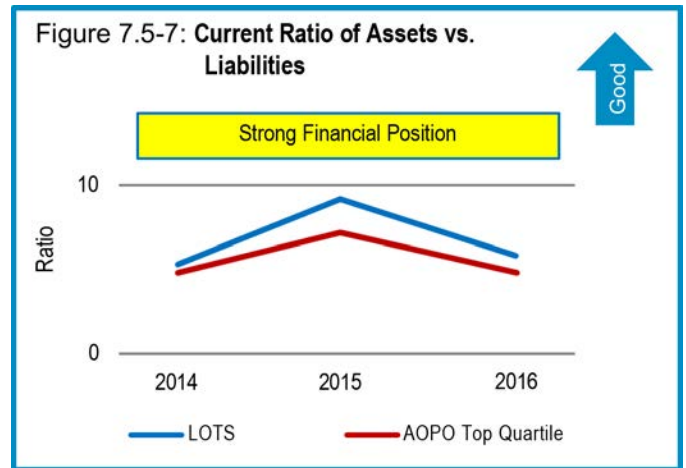
### 7.5a Financial and Market Results

**7.5a(1)** LOTS's financial performance is benchmarked by evaluating key measures within OPO financial surveys conducted by AOPO. LOTS utilizes the surveys to examine its overall financial condition. The organizational goal is to assess whether LOTS's financial and operating status are improving over time and against benchmarks. LOTS also uses budgets to optimize outcomes and continue being a leader in the industry.

Consolidated Results of Operations (*Figure 7.5-1*) demonstrates that LOTS is in a strong position with good performance levels compared to budget, with 2018 organizational results of \$3.36 million. LOTS demonstrates favorable financial levels in several financial measures utilizing the AOPO top-quartile benchmark including gross revenue (*Figures 7.5-2, 7.5-2A, and 7.5-2B*), Operating Margin (*Figure 7.5-3*),

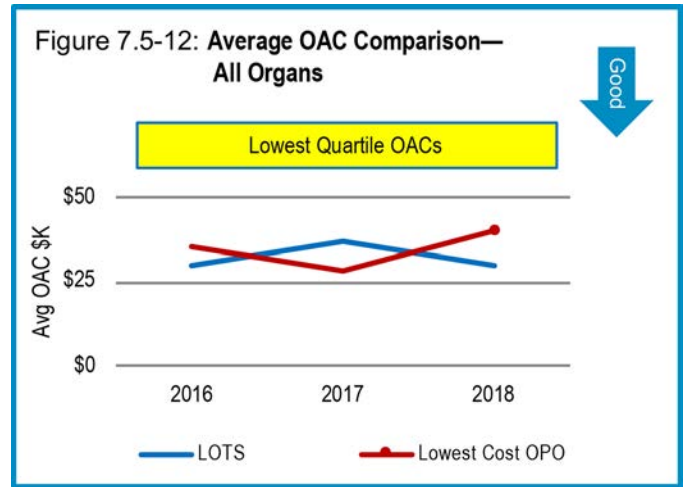
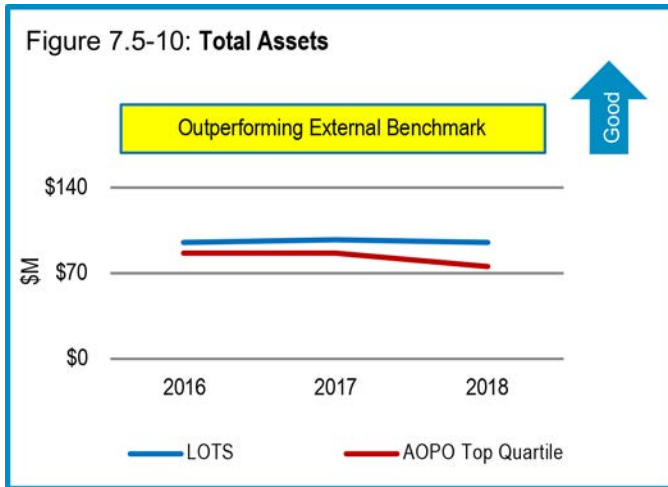


Net Margin (*Figure 7.5-4*), Days in Accounts Receivable (*Figure 7.5-5*), Days in Accounts Payable (*Figure 7.5-6*), Current Ratio of Assets versus Liabilities (*Figure 7.5-7*), and Days Cash on Hand (*Figure 7.5-9*). These results reflect LOTS's identified strategic advantage of possessing a strong financial position and support organizational sustainability.



Operating Reserves (*Figure 7.5-8*) includes cash, investments, and accounts receivable. The amount of operating reserves is set by BOD policy and allows LOTS to ensure mission attainment and organizational sustainability. LOTS sets the standard as Tissue Transformations best-in-class performer.

Total Assets (*Figure 7.5-10*) indicates LOTS's sustainability and strong financial position. Performance shows best-in-class results. LOTS's strong financial and operating returns demonstrate viability and continue to improve over time. Overall financial performance measurements are similar, exceeding industry comparisons, and perform well against the budgetary plan.

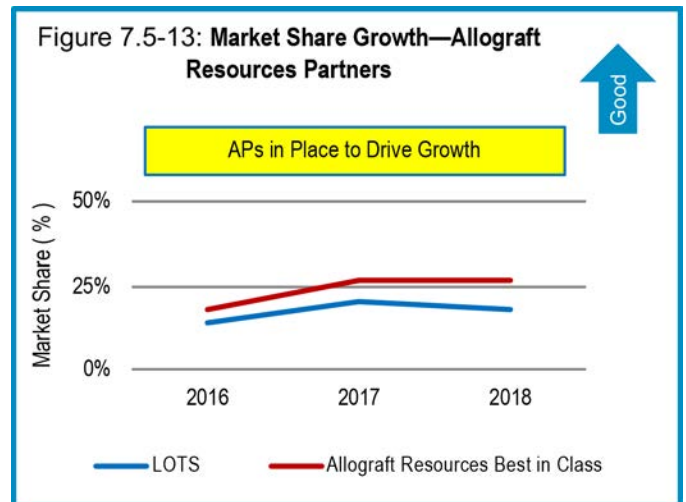
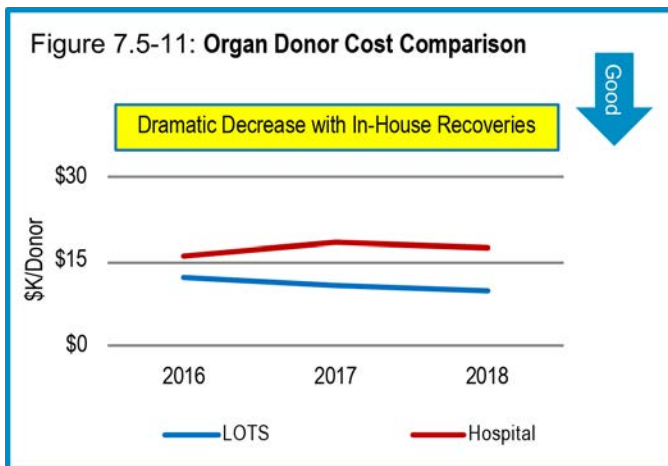


**7.5a(2)** As a nonprofit organization with a DSA that is designated by CMS, LOTS does not look to increase market “share” in the typical way that other companies do, but it looks to improve its own performance within its DSA and to track its progress via the measures represented in item 7.1.

Organ Donor Cost Comparison (*Figure 7.5-11*) demonstrates the difference in donor costs when donors are recovered in the traditional hospital setting versus when transferred to the LOTS facility for donor care and surgical recovery. Efforts to contain costs are measured by budget spending trends and OACs. OAC fees that have been charged to the transplant center partners have historically been (and continue to be) in the lower quartile of similar OPOs at the strategic direction of the LOTS BOD (*Figure 7.5-12*). The comparison data

for these charges are compiled from OPOs, typically with geographic proximity, that are most frequently involved with organ-sharing activities impacting the local transplant centers. Cost containment is an essential area for LOTS’s transplant partners to remain competitive in the health care payer market.

Limited by its DSA, LOTS knows that increases in tissue donations are still possible with identification of new or expanded referral sources. Tissue activity levels remain strong. Market Share Growth (*Figure 7.5-13*) shows LOTS’s contribution to the total Tissue Transformations tissue volume.

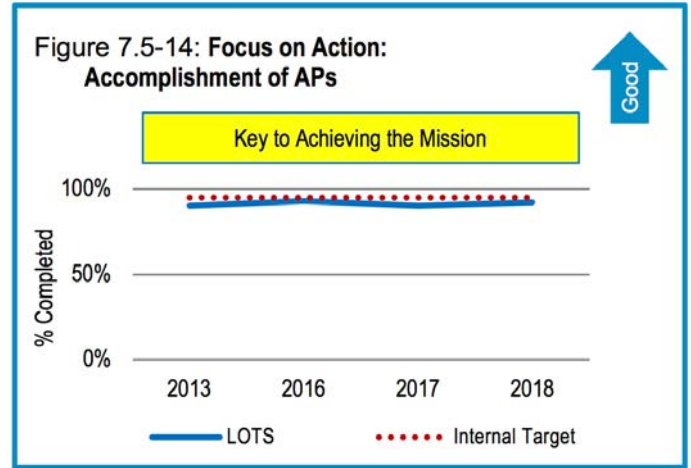


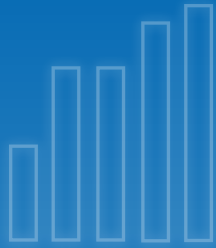


### 7.5b Strategy Implementation Results

Results for accomplishing the organizational APs are found in *Figure 7.4-9*. APs are put in place each year at LOTS, and success in accomplishing those APs is mission-critical in achieving the SOs.

The key metrics for strategy achievement of the mission include Deaths on Local Waiting List (*Figure 7.4-8*) and organ and tissue donors by population (*Figures 7.1-3 and 7.1-4*). Results for building and strengthening the CC of mission-driven workforce are given in Overall Workforce Engagement (*Figures 7.3-12 and 7.3-12A*).





The ratio of the Baldrige Program's benefits for the U.S. economy to its costs is estimated at **820 to 1.**

**110 Baldrige Award winners** serve as national role models.

2010–2018 award applicants represent **641,693 jobs**, 3,072 work sites, over \$166 billion in revenue/budgets, and about 451 million customers served.

352 Baldrige examiners volunteered roughly **\$7.9 million** in services in 2018.

State Baldrige-based examiners volunteered around **\$29 million** in services in 2017.



## What People Are Saying

I have always envisioned Stellar to be a company that is built to last. . . . And if you ask how we can ensure that we are built to last, I would say the answer is Baldrige.

**Celeste Ford**  
CEO and Founder

Stellar Solutions  
Palo Alto, CA  
Baldrige Award recipient

We believe that government can be great. We believe that local government can be great. And we believe that the Baldrige framework is ideally suited to help local government go from here to here [low to high].

**NIST**  
National Institute of  
Standards and Technology  
U.S. Department of Commerce

