

# LifeBridge Organ and Tissue Sharing, Year 2 Case Study

nonprofit

2020

# Baldrige Performance Excellence Program

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



July 2020

To order copies of this publication or obtain other Baldrige Program products and services, contact

## Baldrige Performance Excellence Program

Administration Building, Room A600, 100 Bureau Drive, Stop 1020, Gaithersburg, MD 20899-1020  
www.nist.gov/baldrige | 301.975.2036 | baldrige@nist.gov

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, Year 2, is a fictitious Baldrige Award application prepared for use in the 2020 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, Year 2, 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.

BALDRIGE EXCELLENCE FRAMEWORK®, BALDRIGE CRITERIA FOR PERFORMANCE EXCELLENCE®, BALDRIGE PERFORMANCE EXCELLENCE PROGRAM®, BALDRIGE COLLABORATIVE ASSESSMENT®, BALDRIGE EXAMINER®, BALDRIGE EXCELLENCE BUILDER®, PERFORMANCE EXCELLENCE®, THE QUEST FOR EXCELLENCE®, and the MALCOLM BALDRIGE NATIONAL QUALITY AWARD® medal and depictions or representations thereof are federally registered trademarks and service marks of the U.S. Department of Commerce, National Institute of Standards and Technology. The unauthorized use of these trademarks and service marks is prohibited.

NIST, an agency of the U.S. Department of Commerce, manages the Baldrige Program. NIST has a 100-plus-year track record of serving U.S. industry, science, and the public with the mission to promote U.S. innovation and industrial competitiveness by advancing measurement science, standards, and technology in ways that enhance economic security and improve our quality of life. NIST carries out its mission in three cooperative programs, including the Baldrige Program. The other two are the NIST laboratories, conducting research that advances the nation's technology infrastructure and is needed by U.S. industry to continually improve products and services; and the Hollings Manufacturing Extension Partnership, a nationwide network of local centers offering technical and business assistance to small manufacturers.

**Suggested citation:** Baldrige Performance Excellence Program. 2020. *2020 Baldrige Case Study: LifeBridge Organ and Tissue Sharing, Year 2*. Gaithersburg, MD: U.S. Department of Commerce, National Institute of Standards and Technology. <https://www.nist.gov/baldrige>.

# CONTENTS

2020 Eligibility Certification Form . . . . . E1  
Organization Chart . . . . . O1  
2020 Award Application Form, page A-1 . . . . . A1  
Glossary of Terms and Abbreviations . . . . . G1

---

---

## Preface: Organizational Profile

P.1 Organizational Description . . . . . i  
P.2 Organizational Situation . . . . . iv

---

---

## Category 1: Leadership

1.1 Senior Leadership . . . . . 1  
1.2 Governance and Societal Contributions . . . . . 4

---

---

## Category 2: Strategy

2.1 Strategy Development . . . . . 7  
2.2 Strategy Implementation . . . . . 9

---

---

## Category 3: Customers

3.1 Customer Expectations . . . . . 11  
3.2 Customer Engagement . . . . . 14

---

---

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

4.1 Measurement, Analysis, and Improvement of Organizational Performance . . . . . 17  
4.2 Information and Knowledge Management . . . . . 20

---

---

## Category 5: Workforce

5.1 Workforce Environment . . . . . 22  
5.2 Workforce Engagement . . . . . 26

---

---

## Category 6: Operations

6.1 Work Processes . . . . . 30  
6.2 Operational Effectiveness . . . . . 34

---

---

## Category 7: Results

7.1 Product and Process Results . . . . . 37  
7.2 Customer Results . . . . . 42  
7.3 Workforce Results . . . . . 44  
7.4 Leadership and Governance Results . . . . . 47  
7.5 Financial, Market, and Strategy Results . . . . . 48

2020 ELIGIBILITY  
CERTIFICATION  
FORM

# 2020 Eligibility Certification Form

Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-1 of 12

## 1. Your Organization

Official name	LifeBridge Organ and Tissue Sharing	Headquarters address	444000 Georgie Blvd, Suite 100 Columbia, NT 01011
Other name			
Prior name	<i>(if changed within the past 5 years)</i>		

## 2. Highest-Ranking Official

Mr.  Mrs.  Ms.  Dr.

Name	Marie Jamerson	Address	<input checked="" type="checkbox"/> Same as above
Job title	Chief Executive Officer		
Email	marie.jamerson@LOTS.opo		
Telephone	123-555-0001		
Fax	252-555-1000		

## 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	Address	<input checked="" type="checkbox"/> Same as above
Job title	Director, Quality		
Email	bart.wilson@LOTS.opo	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		

## 4. Alternate Eligibility Contact Point

Mr.  Mrs.  Ms.  Dr.

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

Eligibility package due February 12, 2020  
Award package due April 21, 2020

### 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, 2019
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 2014 (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 2015 and 2019, 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/>).*

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, 2019?

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. *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.*

# 2020 Eligibility Certification Form

## Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-4 of 12

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 2015).	Yes <input type="checkbox"/>	Your organization is eligible.	No <input type="checkbox"/>	Continue with statement 2.
2. Between 2015 and 2019, 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.	Yes <input type="checkbox"/>	Your organization is eligible.  Year:  Total of band scores:	No <input type="checkbox"/>	Continue with statement 3.
3. Between 2015 and 2019, my organization applied for the national Baldrige Award and received a site visit.	Yes <input type="checkbox"/>	Your organization is eligible.  Year of site visit: 2018	No <input type="checkbox"/>	Continue with statement 4.
4. Between 2015 and 2019, my organization received the top award from an award program that is a member of the Alliance for Performance Excellence.	Yes <input type="checkbox"/>	Your organization is eligible.  Award program:  Year of top award:	No <input type="checkbox"/>	Continue with statement 5.
5. More than 25% of my organization's workforce is located outside the organization's home state.	Yes <input type="checkbox"/>	Your organization is eligible.	No <input type="checkbox"/>	Continue with statement 6.
6. There is no Alliance for Performance Excellence award program available for my organization.	Yes <input type="checkbox"/>	Your organization is eligible.	No <input type="checkbox"/>	Continue with statement 7.



# 2020 Eligibility Certification Form

## Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-5 of 12

<p>7. Between 2016 and 2019, 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.</p>	<p>Yes <input checked="" type="checkbox"/></p>	<p>Your organization is eligible.  Year: 2019</p>	<p><input type="checkbox"/> No, my organization did not apply using this method.  <input type="checkbox"/> No, my organization applied using this method, but did NOT receive a total of 6 or higher.</p>	<p>Continue with statement 8.  Your organization is not eligible. Call 877-237-9064, option 3, if you have questions.</p>
<p>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 fact sheet at <a href="#">Eligibility FAQs</a>).</p>	<p>Yes <input type="checkbox"/></p>	<p>The Baldrige Program will review the materials and contact your ECP after determining your eligibility.</p>	<p>No <input type="checkbox"/></p>	<p>Call 877-237-9064, option 3, if you have questions.</p>

### 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 ( $\leq$  500 employees)
- Education
- Health Care

#### Nonprofit

- Nonprofit
- Education
- 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.*

6219		
------	--	--

# 2020 Eligibility Certification Form

## Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-6 of 12

### 8. Organizational Structure

a. For the preceding fiscal year, the organization had

- 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



in

- sales  
 revenue  
 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	<input type="text"/>	Address	<input type="text"/>
Total number of paid employees*	<input type="text"/>		
Highest-ranking official	<input type="text"/>	Job title	<input type="text"/>
Telephone	<input type="text"/>		

\*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.

# 2020 Eligibility Certification Form

## Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-7 of 12

- 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

Date

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.

Relevant portions of the document are attached.

- f. Briefly describe the major functions your parent or its other subunits provide to your organization, if appropriate. *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.*

### 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.*

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)	<i>Check one. % of</i> <input type="checkbox"/> Sales <input type="checkbox"/> Revenue <input checked="" type="checkbox"/> Budget	
	Columbia, NT	150		100%	Regional organ and tissue procurement
<b>Total</b>		<b>150</b>	<b>N/A</b>	<b>100%</b>	

*\*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.*

LOTS has no joint ventures.

### 10. Key Business/Organization Factors

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 Dakota (ND) and South Dakota (SD). 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), tissue processors (Tissue Transformations, LifeBank, and Advantage Life), and an eye bank (VisionMax)

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

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

- f. 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 2020, you may nominate one senior member from your organization to the 2020 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.

Lisa Renaldo

from our organization will serve on the 2020 Board of Examiners.

lisa.renaldo@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 2020, this examiner nomination will not be considered for the 2020 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*

Marie Jamerson

Feb. 10, 2020

Signature of highest-ranking official

Printed name

Date

# 2020 Eligibility Certification Form

## Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

Page E-11 of 12

### 13. Submission

To be considered for the 2020 award, your complete eligibility certification package *must be postmarked no later than* February 12, 2020, 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: 075-000-022 Checking account number: 182322730397	
<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:mbnqa@asq.org">mbnqa@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.

Eligibility package due February 12, 2020  
Award package due April 21, 2020

# 2020 Eligibility Certification Form Checklist

Malcolm Baldrige National Quality Award

OMB Control No. 0693-0006

Expiration Date: 07/31/2022

## 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 2020 Board of Examiners.
- I am not nominating a senior member of my organization to the 2020 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/>.)

Eligibility package due February 12, 2020  
Award package due April 21, 2020



# ORGANIZATION CHART



PAGE A-1  
OF THE  
2020 AWARD  
APPLICATION FORM

# 2020 Award Application Form

## Malcolm Baldrige National Quality Award

OMB Clearance #0693-0006

Expiration Date: 07/31/2022

Page A-1

### 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 the 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 (Do not use a P.O. box number.)
Telephone	252-555-0072 (office); 123-555-2715 (cell)
Fax	123-555-1000
E-mail	bart.wilson@LOTS.opo

### 4. Alternate Official Contact Point

Mr.  Mrs.  Ms.  Dr.

Name	Lisa Renaldo
Telephone	123-555-0007
Fax	123-555-1000
E-mail	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, I agree that the 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* on our website [<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, 2020
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
Email	marie.jamerson@LOTS.opo
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

---

**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

---

**BOD**

Board of Directors

### C

---

**CAP**

College of American Pathologists

**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

**CDP**

Career Development Planning

**CEO**

Chief Executive Officer

**CFO**

Chief Financial Officer

**CHNA**

Community Health Needs Assessment

**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

**CSF**

Cyber Security Framework

**CSS**

Community Support System

### D

---

**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

**DHHS**

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

---

**EEOC**

Equal Employment Opportunity Commission

**ELT**

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

**EMR**

Electronic Medical Record

**EPA**

Environmental Protection Agency

**ERP**

Emergency Response Plan

**F**

---

**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**

---

**Gift of Life**

Organs and tissues donated by donor families

**GPR**

National organization providing comparative satisfaction and engagement data.

**H**

---

**HHS**

U.S. Department of Health and Human Services

**HLA**

Human Leukocyte Antigen

**HR**

Human Resources

**HRSA**

Health Resources and Services Administration

**I**

---

**ICU**

Intensive Care Unit

**IMP**

Innovation Management Process

**Individual Scorecards**

Measurement system tool tracked at the individual level

**IPP**

Information Protection Program

**IT/IS**

Information Technology/Information Systems

**III**

Improvement, improvement, improvement

**L**

---

**LDS**

Learning and Development System

**LOTS**

LifeBridge Organ and Tissue Sharing

**LS**

Leadership System

**LT**

Leadership Team

**M**

---

**ME**

Medical Examiner

**N**

---

**NT**

State of North Takoma

**O**

---

**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

---

### **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

### **PSA**

Public service announcement

## Q

---

### **QAPI**

Quality Assessment and Performance Improvement

### **QS**

Quality Systems

## R

---

### **RFO**

Rounding for Outcomes

### **ROI**

Return on Investment

## S

---

### **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

## ST

State of South Dakota

## SWOT

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

## T

---

### **Tissue**

Refers to musculoskeletal, skin, cardiovascular, and eye

### **Tissue Yield**

Tissue procured per donor

### **TPC**

Tissue Procurement Coordinator

### **Topline Scorecard**

Performance measurement tool reflecting status of key organizational metrics

### **TT**

Titan Technology

### **TWS**

Tissue Work System

## U

---

### **UAGA**

Uniform Anatomical Gift Act

### **UNOS**

United Network for Organ Sharing

## V

---

### **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

## W

---

### **WPFL**

Workplace for Life

### **WPMS**

Workforce Performance Management System



# ORGANIZATIONAL PROFILE

# Organizational Profile

## P.1 Organizational Description

### P.1a Organizational Environment

**P.1a(1)** For more than 25 years, LifeBridge Organ and Tissue Sharing (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. Regulations mandate that LOTS may not operate outside of its designated area, and no other OPO may operate within LOTS’s area.

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 to ensure that organs and tissues are always available for key customers.

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).

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	Innovation	

Figure P.1-2: Partnership Model

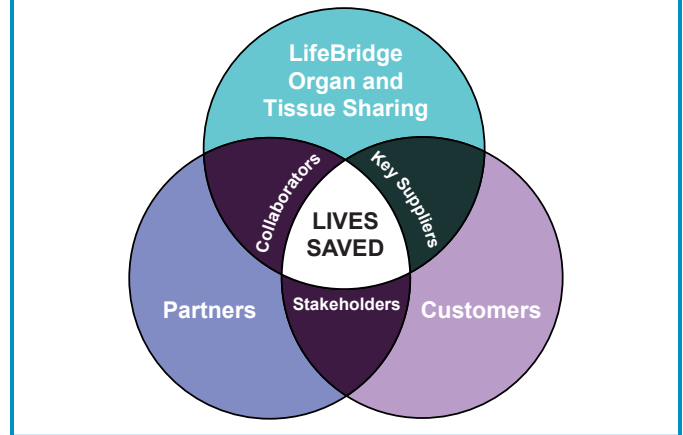
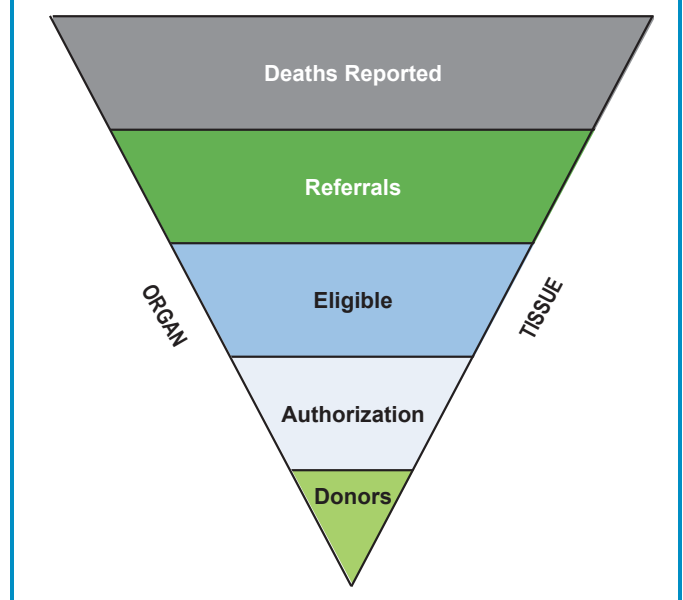


Figure P.1-3: Finding the Heroes



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)** LOTS’s vision is *Organs and tissues are always available* (Figure P.1-1). 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’s culture is a strong drive to meet the mission: *We save and improve lives*.

According to the Health Resources and Services Administration (HRSA), the number of people on the national waiting list for organ donation and tissue transplantation continues to be much larger than both the number of donors and transplants available, and the trend is continuing. For example, in 1991, there were 23,198 people on the national waiting list, 15,756 transplants were performed, and there were 6,953 donors. In 2017, there were 115,000 people on the waiting list, 34,770 transplants were performed, and there were 16,473 donors. In 2018, 36,528 transplants were performed nationally—a new record high for the sixth consecutive year. In 2018, more than 145 million people over the age of 18 had registered as national organ donors, which is about 54 percent of all U.S. adults.

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, innovation, 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.

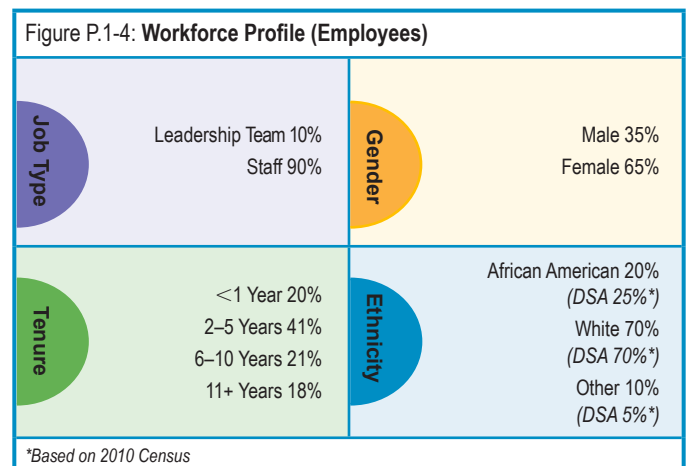
*Mission-Driven Workforce:* The work of LOTS, by its very nature, requires a level of care and compassion that can only be delivered by the “human touch.” Therefore, the actions and behaviors demonstrated by the staff are directly linked to creating a positive donation experience for the donor family (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 7.3-13).

**P.1a(3)** LOTS is a 24/7 business in which many of the employees are decentralized. For example, members of the Hospital Services staff spend most of their time at donor hospitals. 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. In addition, LOTS recently hired a professional in public relations communication to lead its communications and outreach initiatives, as well as an IT specialist to address cybersecurity issues. For the purpose of reporting and 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 workforce survey cycles have validated three of the highest-scoring survey attributes: the workforce 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 working in hospitals also apply to the nonclinical workforce. Similarly, typical office-related safety requirements apply to the nonclinical workforce. 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. Utilizing technology,



LOTS provides its workforce with collaborative tools, real-time access to key data including an electronic medical record (EMR) system (Transplant Technologies), and reporting services that provide customized reports.

**P.1a(5)** The field of organ and tissue donation is one of the most regulated areas of health care. Both state and federal regulations have been put in place to provide the safest and most equitable system for allocation, distribution, and transplantation of donated organs and tissue. In addition, local environmental and regulatory initiatives address both fire and sanitation measures; biohazard trash disposal meets all local and state regulations. LOTS’s key regulatory requirements are identified in Quality Compliance Management (*Figure P.1-5*).

**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 for the organization and is composed of hospital executives, medical professionals, transplant recipients, donor family members, and community representatives. 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 workforce.

**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), tissue processors (Tissue Transformations, LifeBank, and Advantage Life), and an eye bank (VisionMax) 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), and Transplant Technologies (*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 and

Wright Brothers Charter 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. Recent efforts to help educate the public about organ donation and encourage people to register as donors have led to the creation of new partnerships with state Department of Motor Vehicles (DMV) and the Workplace for Life (WPFL).

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 workforce 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

**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
HHS/ UNOS/ OPTN	Organ Allocation/Operational Oversight	Mandatory
<b>Occupational Health and Safety</b>		
OSHA	Workplace Safety	Mandatory
<b>Accreditation</b>		
AATB	Standards for Tissue Banking Accreditation	Voluntary
AOPO	Standards for Organ Procurement Accreditation	Voluntary

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. Key suppliers and partners promote innovation by bringing forward process improvement ideas and techniques. Inputs from partners and collaborators, as well as other key stakeholders, feed into the SPP (*Figure 2.1-1*) and help drive process improvement and innovation. LOTS’s key supply-network requirements for suppliers include timely communication, accurate information, and service quality (*Figure P.1-6*).

**P.2 Organizational Situation**  
**P.2a Competitive Environment**

**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 also has recently begun partnering 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 changes to or elimination of the Affordable Care Act will be a challenge for the health care industry, the scope of changes to the OPO industry is uncertain at this time. As such, the organization has decided to focus on what it can control:

- increasing the number of registered donors within the DSA through the identification of nonhospital referral sources, and

Figure P.1-6: Key Stakeholder Requirements	
Customers	Requirements
Transplant Centers—Organ	<ul style="list-style-type: none"> <li>• Maximize donation and transplantable organs</li> <li>• Information/relationships/communication</li> <li>• Competence/efficient high-performance work</li> </ul>
Tissue Processors and Eye Bank	<ul style="list-style-type: none"> <li>• Maximize Donation and transplantable organs</li> <li>• Information/relationships/communication</li> <li>• Performance to projections</li> </ul>
Key Partners	
Donor Hospitals Medical Examiners Hospices Marketing Partners (DMV, WPFL)	<ul style="list-style-type: none"> <li>• Timely referrals</li> <li>• Regulatory compliance</li> <li>• Respect/Sensitivity</li> <li>• Information/relationships/communication</li> <li>• Service Quality</li> </ul>
Collaborators	
Organ and Tissue Donor Families	<ul style="list-style-type: none"> <li>• Compassionate care, emotional support, aftercare, and follow-up</li> <li>• Stewardship of the Gift</li> <li>• Honor for the Donor</li> </ul>
Funeral Homes/ Columbia Cremation	<ul style="list-style-type: none"> <li>• Information/relationships/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> <li>• Education, transparency, accessibility</li> </ul>
Workforce	<ul style="list-style-type: none"> <li>• Connection with V/M/V</li> <li>• Excellent Benefits</li> <li>• Coworkers/Teamwork</li> </ul>
Board of Directors	<ul style="list-style-type: none"> <li>• Strategic Planning</li> <li>• Administration</li> <li>• Financial Management</li> </ul>
Key Suppliers	Expectations
Guardian Ambulance Wright Brothers Charter TT Transplant Technologies	<ul style="list-style-type: none"> <li>• Accurate Information</li> <li>• Service Quality</li> <li>• Timely Communication</li> </ul>

- 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 to manage future challenges.

Key factors influencing the success of LOTS include

- a mission-driven workforce (CC) that is highly motivated and engaged in *saving lives*, and
- strong relationships formed through partnering and collaboration to support innovation and performance improvement.

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 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. In addition, based on Baldrige feedback, LOTS is planning a “Baldrige Benchmark Project” to seek out benchmarks whenever possible.

**P.2b Strategic Context**

Strategic challenges (SCs) and advantages (SAs; *Figure P.2-1*) are reviewed annually during step 3 of the SPP (*Figure 2.1-1*); steps 5 through 8 ensure that appropriate action plans (APs) are linked to organizational success.

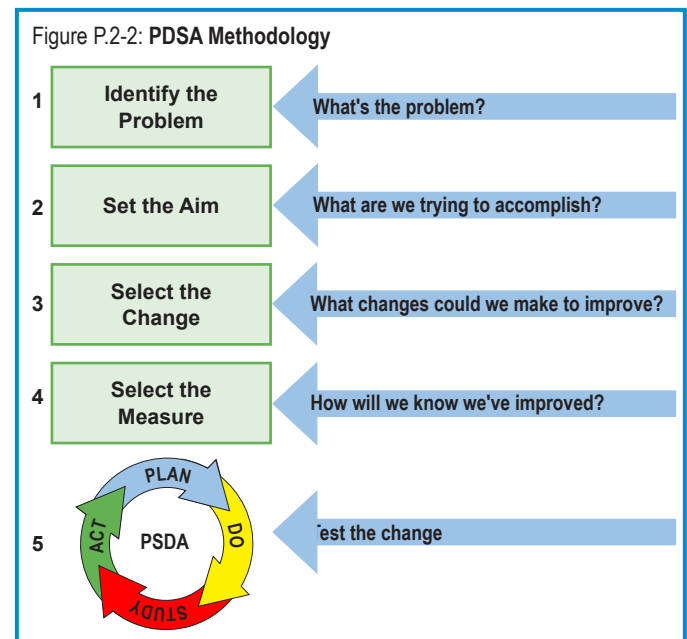
**P.2c Performance Improvement System**

Together with the BOD, the LOTS LT creates an environment that supports innovation 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

Figure P.2-1: Strategic Challenges and Advantages		
Strategic Challenges		Examples of Alignment to Strategic Objectives/Goals (Figure 2.1-3)
Business	• Industry changes	• SO 1/Increase Organs Transplanted, Increase Bone Donors
Operational	• Authorization	• SO 2/Increase Tissue Authorization
Societal Responsibility	• Increase Registry	• SO 1/Increase Organ Donors
Workforce	• Retention	• SO 3/Improve Workforce Retention Rate
Strategic Advantages		
Business	• Stakeholder Satisfaction	• SO 3/Sustain Transplant Center Satisfaction, Improve Tissue Processor and Eye Bank Satisfaction, Sustain Donor Family Satisfaction
Operational	• Facilities and Equipment	• SO 4/Ensure Supply Optimization
Societal Responsibility	• Baldrige Business Model	• SO 4/Ensure Regulatory and Legal Compliance, Increase Results of Operations, Accomplish Action Plans
Workforce	• Supportive Mission-Driven Culture	• SO 4/Ensure Connection to the Mission

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, to foster innovation, and to seek out strategic opportunities. An environment that fosters innovation and continuous process improvement 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. Based on prior-year learnings, Plan-Do-Study-Act (PDSA; *Figure P.2-2*) cycles and feedback loops were added to many of LOTS’s processes.

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 PDSA problem-solving methodology (*Figure P.2-2*). This methodology is embedded in LOTS’s improvement processes. In addition, LOTS has introduced a new program known as “III,” which stands for improvement, improvement, improvement. Every meeting and every process has a built-in improvement process. All individual performance reviews have an “III” component, and staff members have goals related to this philosophy.



RESPONSES  
ADDRESSING ALL  
CRITERIA ITEMS

## Category 1: Leadership

### 1.1 Senior Leadership

#### 1.1a Vision and Values

**1.1a(1)** The 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 and decided to change its value of improvement to “innovation” because LOTS prides itself on being open to new ideas and creative thinking that goes beyond process improvement. This process incorporated employee input using an internal survey. The V/V were updated, vetted, and ratified by the BOD.

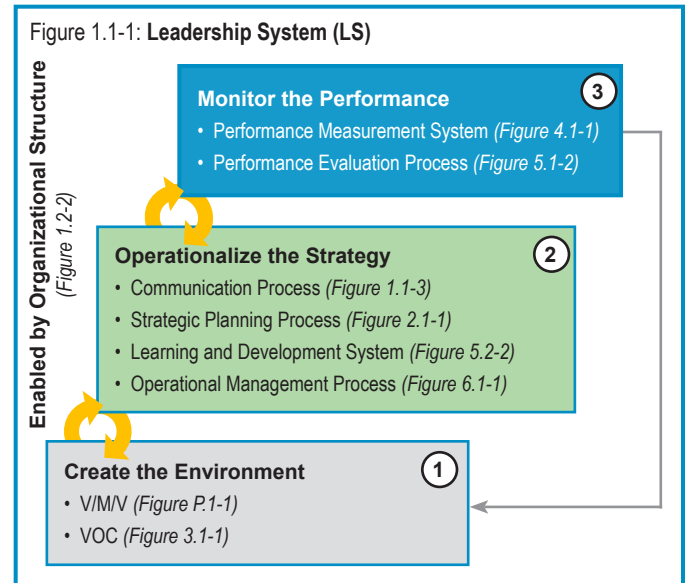
The LT deploys the V/V and culture to the workforce, as well as to customers, stakeholders, partners, and suppliers, via multiple communication mechanisms as managed by the Communication Process (*Figure 1.1-3*). Examples include

- reviewing and emphasizing the V/M/V during board, staff, and department meetings; and
- 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 each 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. In addition, the LT systematically reviews and improves the LS process during an annual strategic discussion (SD) using PDSA. As part of the adoption of PDSA, a gap was found in the use of operational data in the SPP, so an operational data feedback loop was added to the OMP (*Figure 6.1-1*) and into the SPP. Learning has also led to the addition of a feedback path in the LS.

The 360-degree review process is owned by the CEO. Similarly, each LOTS process has an individual as the primary owner (although many others may “use” the process). Each owner’s responsibilities for his/her process include (1) define, (2) measure, (3) hardwire, (4) implement fully, (5) stabilize, and (6) improve. Improvement for a process is triggered by either a significant event or (minimally) is done annually.

**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. Every year, the LT reviews the CCP using PDSA to identify and implement opportunities for improvement. In addition, compliance policies are reviewed by LOTS Quality staff.

#### 1.1b Communication

LOTS’s LS has gone through several cycles of improvement, including the addition of new mechanisms to communicate with the workforce and more opportunities for interaction with the LT, such as monthly LT rounding with workforce members. 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. Completion of the Communication Process is accomplished through knowledge sharing and feedback.

To promote frank, two-way communication with employees, the LT uses the Communication Process, which supports an open-door policy, and the RFO, which refers to the consistent practice of asking specific questions to obtain actionable



Figure 1.1-2: Corporate Compliance Program (CCP)

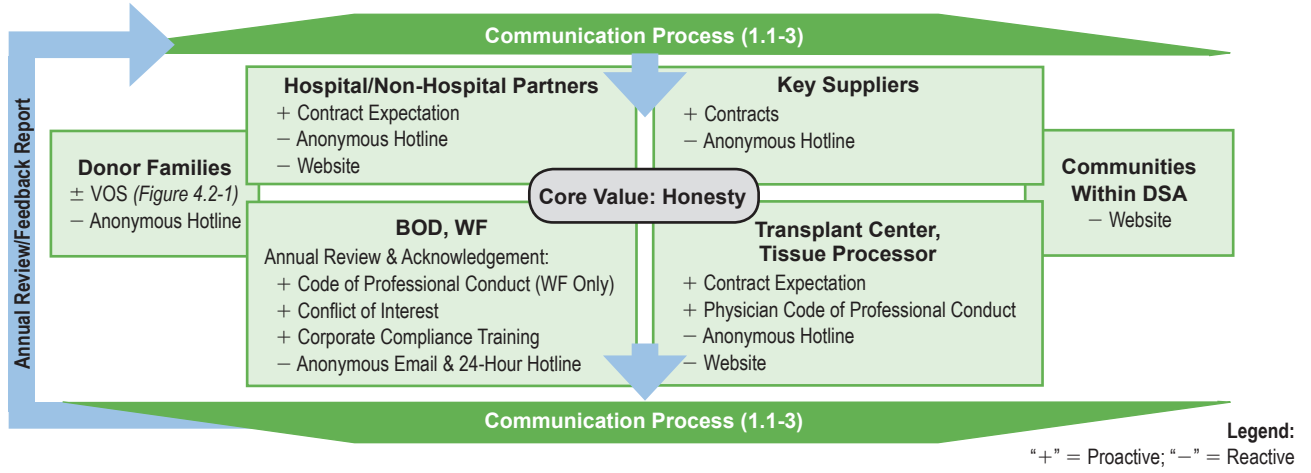
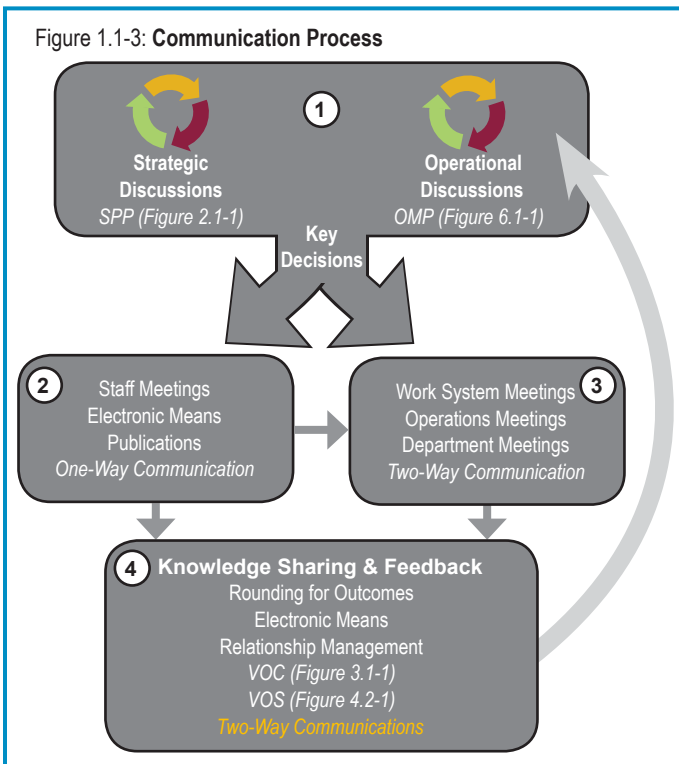


Figure 1.1-3: Communication Process



information. LT members “round” with workforce members to gain knowledge, including the support needed to help the workforce 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 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, tissue processors, and an eye bank 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, such as campaigns and messaging to increase the number of registered donors within the DSA. In addition, social media are used to communicate and highlight donor family and recipient stories via YouTube, 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 innovation, drives LOTS to stay aware of industry knowledge and best practices (see also 4.2b[2]). 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 opportunities for innovation and improvement in order to save and improve more lives. LT members leverage the Baldrige Excellence Framework, relationships with suppliers and partners, and changes in the OPO environment to cultivate organizational agility and intelligent risk taking and create opportunities for innovation. During an annual SD with the BOD, senior leaders review stakeholder feedback collected and analyzed during the SPP, conduct risk analysis on potential strategic initiatives, and determine intelligent risks worth taking for innovation and organizational improvement. As part of the SPP, the LT determined that there was a gap in the performance of managing innovation and intelligent risk. As a result, a process and management structure were established, which is described in 2.1a(2) and 6.1d.

Senior leaders create an environment for agility and the achievement of the mission by setting clear expectations of accountability for achieving strategies, tactics, and actions as part of systematically deploying performance reviews, which are linked to the values of the organization, and to the mission and vision. Organizational agility comes from the SPP and performance reviews, where periodic review of outcomes and strategic tactics allows for changes to address gaps or opportunities identified for improvement (such as those identified from the VOC (see [Figure 3.1-1](#)). Gaps or opportunities can be addressed through a variety of tactics including PDSA or next generation growth (see 5.2c[4]).

The LT creates an environment that encourages and supports accountability, organizational learning, innovation, and intelligent risk taking. One of the ways that the LT does this is through monitoring 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. Gaps identified are assessed for impact on organizational agility, intelligent risk taking, and/or innovation. Gaps with organizational impact are analyzed, and any that would improve agility and innovation within appropriate risks may become improvement actions or process changes.

The LT develops succession plans for leadership positions (including CEO) to ensure that there are opportunities for future leaders to grow within the organization and that appropriate leadership is available should a vacancy occur. 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 current and future leaders. LT development has included training through the Learning Development Institute, attendance at state and national industry conferences, and attendance at nation-wide nonindustry

conferences. In alignment with the III program, senior leaders systematically use PDSA to review and improve the effectiveness of their involvement in succession planning, the development of future leaders, and other processes that create an environment for organizational success. Each member of the LT works with potential successors to mentor their development. LT involvement in the development of future organizational leaders includes opportunities for shadowing, special assignments, participation in the learning development curriculum, and rewards and recognition for outstanding workforce members. The approach to succession planning has been evaluated and improved several times; the latest refinement was in 2019, based in part on Baldrige feedback. In its latest evaluation, the LT recognized that growing organ and tissue donation required greater organizational agility. In addition to formal leadership training through the Learning Development Institute, greater emphasis is being placed on creating opportunities for learning within the organization. On-the-job training offers a cost-effective way to cross-train and to link training more closely to LOTS’s capacity needs and priorities, resulting in future leaders with a broader understanding of organizational needs.

**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 identify opportunities for innovation and 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 workforce 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.

The LT uses LOTS’s PDSA improvement methodology ([Figure P.2-2](#)) to continually take the LS to the next level in

pursuit of the vision. For example, the Corporate Compliance Program has been through three cycles of evaluation and improvement in the last four years. This has resulted in greater engagement with employees and stakeholders, and has led to changes in annual compliance policy training.

## 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 the following:

- Hold management accountable for operational results through evaluation of the monthly Status Report/Topline Scorecard, which shows SO target progress.
- Review and approve the strategic plan, budget, Quality Assessment and Performance Improvement (QAPI), and topline metrics annually.
- Achieve fiscal accountability by in-detail review of financial reports at board meetings.
- Ensure 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 NT and ST Medical Advisory Boards, 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.
- Maintain 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.
- Develop and approve a formal succession plan for the CEO. Authority has been delegated by the BOD to the CEO to oversee succession plan development for other senior leaders.
- Systematically review and improve the governance processes using LOTS's PDSA process. The overall governance process has been through multiple cycles of improvement since the BOD began its systematic reviews in 2014. Examples of improvements include improving the succession plan for the CEO position, improving follow-ups to the Audit Committee's recommendations, and creation of the monthly Status Report.

**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 to improve the effectiveness of the governance system. The survey includes a self-assessment of the members' 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 7.4-3*). These survey results help guide BOD meetings and communication.

All governance processes are evaluated for effectiveness in the third quarter BOD off-site, which is used as a key input to the SPP.

### 1.2b Legal and Ethical Behavior

**1.2b(1)** 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 put in place to provide the safest and most equitable system for allocation, distribution, and transplantation of donated organs. Continuing scientific and technological advances in organ transplantation requires ongoing policy refinements. Policies evolve to ensure that patients benefit from the best possible solutions. 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. As part of its work, the BOD, through its Compliance Committee, also monitors industry proposals in an effort to anticipate new legislation or regulatory requirements and to ensure that LOTS is prepared to address them.

A Crisis Communication Plan has been developed to ensure an appropriate response to public concerns, if needed. As part of the plan, media alerts and position statements created by industry organizations are used in response to national news stories and are distributed to the workforce, the BOD, and the community as appropriate.

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; the form 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 (*Figure 7.4-5*).

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. During the past year, LOTS has further developed and deployed procedures for ensuring compliance with its Code of Conduct to its supply network and partners.

**Figure 1.2-2: Organizational Structure**

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>

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 them 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.

**Figure 1.2-1: Key Regulatory and Legal Requirements**

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	7.4-4
Compliance with FDA requirements	FDA audits	FDA approval	No adverse findings	7.4-4
Voluntary compliance to meet organ donation industry standards	Internal audits QA/Training	AOPO accreditation	Full accreditation	7.4-4
Voluntary compliance to meet tissue donation industry standards	Internal audits QA/Training	AATB	Full accreditation	7.4-4
Compliance with CMS regulations impacting reimbursement	CMS audit Internal audit	CMS certification	Full certification	7.4-4
Compliance with IRS regulations impacting not-for-profit organizations	External Financial audits	Minimal audit adjustments	Unqualified opinion	AOS
	Corporate Compliance Process (CCP)	Annual training acknowledgement Reported hotline issues	100% Completion No Events	AOS 7.4-5
Compliance with regulations impacting Human Resources	EEOC guidelines	Policy Compliance	No events or occurrences	7.4-5
	FLSA posted	Posting		
Safe work place	Safety officer Safety committee Employee training	OSHA site audits	Full compliance No reportable events	7.4-4
		Reportable events		7.3-7
Compliance with DOR requirements	DOR audit	DOR approval	No adverse findings	7.4-4

## 1.2c Societal Contributions

**1.2c(1)** 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 the 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. During the systematic review of societal contribution process in step 1 of the SPP, LOTS completes risk analysis and determines return on investment (ROI) for strategic decisions about societal well-being and community selection and support.

Through facility design, which includes the Energy Management System, LOTS contributes to environmental well-being. 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. Energy conservation strategies include glazing, day lighting, lighting controls, lighting design, and the use of air-cooled chillers. Multiple efforts are being made across the organization to reduce paper usage, including the use of a board portal and screen projection of all meeting data, the transition of several support departments to paperless systems, and a reduction in paper hand-outs for stakeholders by providing data electronically. In addition, LOTS has recently begun formalized recycling programs for plastic and aluminum. LOTS uses the EPA’s ENERGY STAR® Portfolio Manager as an online tool to measure and track energy consumption. In addition, LOTS has recently joined EPA’s WasteWise program, and has set a goal to reduce waste by 5 percent (through a combination of waste prevention and recycling) from its 2018 baseline (*Figure 7.1-27*). To accomplish this, the organization continues to explore “green” opportunities suggested by the workforce, partners, and customers. LOTS prepares for impacts and concerns proactively through effective supply-network management processes, which include a secure electronic database and established par levels.

**1.2c(2)** The BOD uses a systematic approach involving collection and analysis of feedback from community representatives to identify LOTS’s key communities to support. The foundation of the Community Support Determination Process (*Figure 1.2-3*) is LOTS’s mission and vision, core competency, and values. Steps include identifying opportunities that may be based on feedback from donor families, transplant recipients, workforce members, and/or community partners; discussing involvement using a SD and considering alignment with the MVV; allocating resources of time, treasure, and talent; and

considering partnership involvement. The review and assess step is used to evaluate results and gather feedback from key communities, the workforce, and partners to determine future participation.

Columbia University Hospital, one of LOTS’s key customers, has created a three-year Community Health Needs Assessment (CHNA) to determine areas of support needed for the county and surrounding areas; through a partnership in 2019, the hospital has shared the results from this assessment. LOTS uses this information to help understand the residents in its DSA and integrates this information into the SPP to create specific strategies, tactics, and actions for organizational involvement.

Also, during the SPP, a systematic review is conducted of the geographic and socioeconomic areas of LOTS’s involvement (i.e., the DSA). The review has consistently shown that LOTS’s key communities are donor families, transplant recipients, and their families within the DSA. The LT validates the key communities annually as part of the SPP (*Figure 2.1-1*).

LOTS is now focusing on creating other partnerships with regional nonprofits, businesses, physicians, and others to serve the community by leveraging LOTS’s core competency. There is an agile daily process of identifying unanticipated requests. This process is evaluated for improvement two months before the beginning of the SPP cycle (2.1a[1]), and any changes to ensure agility of effectiveness are incorporated into the SPP. Part of these partnerships includes an educational component on the benefits of donor registration.

Recent examples of community support include construction of a Donor Memorial Monument and park for donor and recipient families to gather, remember, and honor their loved ones. In addition, staff members actively participate in memorial events hosted across the organization’s DSA.

Based on a cycle of learning, LOTS noted a gap in community support for the local Air Force base. This resulted in a tie-in with the base hospital, which now provides donor education for the military and their families. LOTS also has become part of a support group addressing employment opportunities for the mobile military spouses and families.

Figure 1.2-3: Community Support Determination Process



## Category 2: Strategy

### 2.1 Strategy Development

#### 2.1a Strategy Development Process

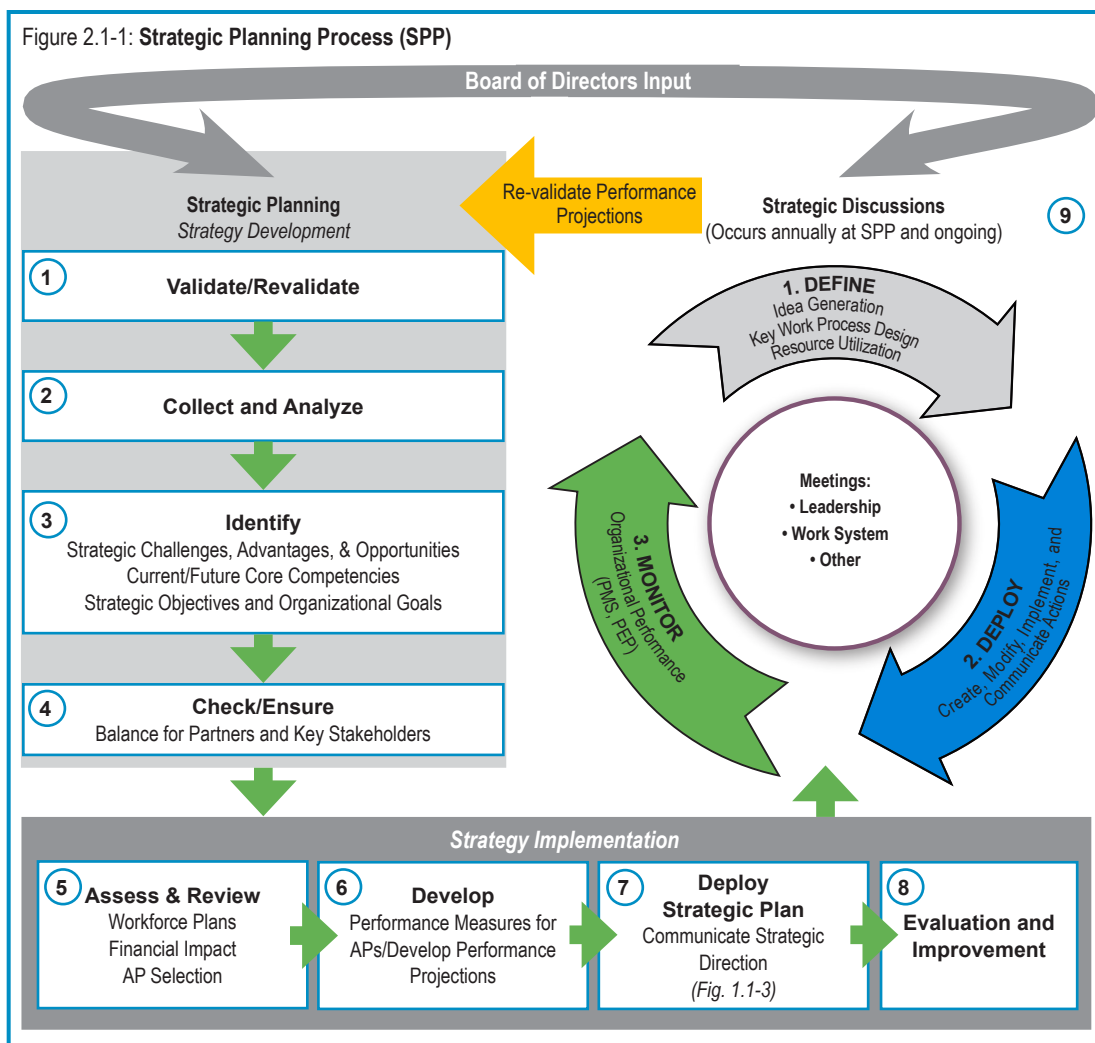
**2.1a(1)** The OPO business ecosystem is one that requires LOTS to be agile to ensure its ability to meet customer and, ultimately, recipient needs. Therefore, through cycles of learning, the focus of strategic planning has evolved from a process based on defining and approving actions to support the budget, to the systematic SPP occurring throughout the year, supported by APs and goal achievement. The 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. Additional input into LOTS’s planning process comes from the national Organ Procurement and Transplantation Network (OPTN). For example, LOTS’s COO has been active on OPTN’s OPO Committee to develop requirements that will expedite the organ placement process. The recommendations have been incorporated into LOTS’s SPP.

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 9 of the SPP, focused SDs 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 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, innovation, and continuous improvement to support LOTS’s life-saving mission.

In alignment with the III program, 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.



In step 8 of the SPP, an annual cycle of evaluation and learning is formally conducted to improve the SPP each year. This step includes inputs from the BOD, senior leaders, and virtually all SPP participants. Since 2019, proposed changes have been systematically vetted against 11 quantitative and 4 qualitative criteria (AOS).

**2.1a(2)** The commitment to the mission of *saving and improving lives*, along with the value of innovation, drives LOTS to stay on the top of industry knowledge and best innovative practices. The SWOT (Strengths, Weaknesses, Opportunities, and Threats) list is reviewed during the SPP (step 2) and validated through ongoing SDs (step 9). Strategic opportunities are identified in step 3

of the SPP and during ongoing SDs that promote “out-of-the-box” thinking. These strategic opportunities are systematically reviewed and prioritized. For the 2019 planning cycle, the key strategic opportunities identified were to continue a focus on registry enrollment and improving customer satisfaction.

Cycles of improvement for the process to identify, review, and prioritize opportunities have included the utilization of Innovation Management Teams that comprise multidisciplinary and diverse departments, workforce members, and partners (see the Innovation Management Process (IMP; 4.1c[2])). Teams perform data review and use PI tools, including PDSA, to complete brainstorming and prioritization sessions. The improvement system itself is used to ensure that appropriate and informed opportunities are assessed and due diligence conducted before pursuing an identified strategic opportunity.

Established this past year, an Innovation and Risk Board is used to vet and approve large system-wide innovations (some of which are identified through industry efforts) following the process outlined in 6.1d. The board is staffed by the PI Team and key members of the LT, with the goal to systematically explore the enterprise for scalable innovations. The PI Team focuses about 80% of its time on large process improvement and innovation projects, and 20% supporting smaller projects across the system. The Innovation and Risk Board oversees the Innovation Management Teams.

**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*)
- CHNA (1.2c[2])

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 3 (Identify), using the information gleaned from step 2, LOTS identifies and validates its SCs, SAs, core competencies, etc. This process also 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.

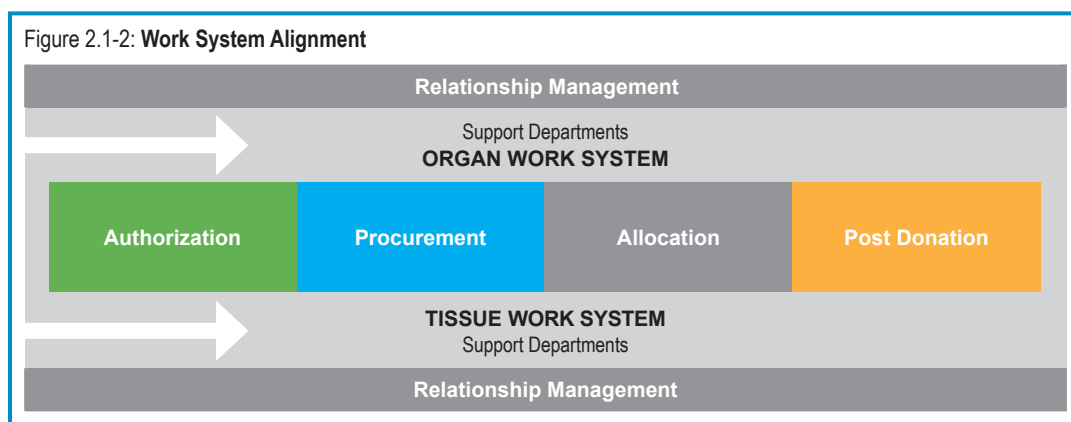
Following analysis of the present situation, which includes a review of historical data, step 6 involves the completion of a performance projection exercise to effectively forecast activity levels for key organizational metrics for the next two years.

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 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)** LOTS key work systems are the OWS and the TWS (*Figure 2.1-2*). Within step 3 of the SPP, LOTS defines and validates its SAs, SCs, SOs, current and future potential core competencies, and organizational goals based on current performance and the environmental scanning analysis (completed in step 2). Incorporation of organizational knowledge, new technology, product excellence, and agility are accomplished through the OMP (*Figure 6.1-1*). In alignment with the III program, work systems and the core competency are systematically evaluated in step 8 of the SPP, which was added in 2014, as are all aspects of the SPP itself.

LOTS understands that external suppliers and partners may provide additional capabilities or capacity that LOTS does not possess, so outsourcing is always an option. The decision to

outsource a process or to manage it internally is initiated through the SPP (step 5, Assess and Review); evaluation of each outsourcing opportunity is then moved to the systematic Make/Buy Process. Evaluation includes annual assessment of LOTS’s core competency, current and potential key supplier



and partner expertise/skills (using supply network surveys and interviews), changes in the industry ecosystem and regulations, an analysis of LOTS's workforce capabilities and capacity, and associated costs. Suppliers and partners must align with the MVV and possess the skills needed to augment LOTS's workforce capability and capacity, assessed through the Workforce Planning Process (*Figure 5.1-1*). The evaluation criteria include the following:

1. MVV Aligned: Does the supplier's MVV align with LOTS's MVV?
2. Determine Risks and Opportunities: Is there an impact to customer and stakeholder satisfaction and engagement?
3. Review Current Capabilities: Does the supplier have a core competency that allows it to execute better than LOTS?
4. Review of Cost Impact: Internal and external cost?
5. Process Efficiencies: Is the supplier capable of executing the system, and what training will be involved, if any?
6. Win-Win Situation: Is the partnership beneficial to all?

This approach is reviewed via SDs and the OMP every year to enable cycles of learning and improvement. For example, during the annual SPP, a SD was held regarding the strategic opportunity of moving local donor transportation services in-house. A team was formed and the question was vetted through the OMP. Final analysis revealed higher transportation costs and additional resources required if the process was moved in-house, which would divert focus from the organization's mission. By leveraging the core competency of Guardian Ambulance, cost savings were recognized. As another 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 required laboratory testing.

### 2.1b Strategic Objectives

**2.1b(1)** LOTS's SOs, organizational goals, and timetables for achieving them are shown in *Figure 2.1-3*. The first three SOs are most critical to saving lives: maximize donations OWS, maximize donations TWS, and maximize stakeholder relationships. The fourth SO—maximize organizational excellence—is also critical to LOTS's sustainability and reflects the decision to focus on achieving cost-effectiveness and efficiencies to sustain a strong financial position to manage future challenges.

Key changes in LOTS's operations include the development of new marketing partnerships. To encourage donor sign-ups, LOTS has launched a "check-the-box" campaign in conjunction with the DMVs in both NT and ST. In addition, LOTS has launched a "Workplace for Life" campaign, and SDs are underway regarding plans to work with faith-based organizations on a similar campaign to increase donor registration, tentatively entitled "We Believe in Life."

**2.1b(2)** The SOs are created in step 3 of the SPP when the LT considers strategic opportunities and balances them against strategic challenges, the core competency, and key stakeholders' requirements. The resulting SOs are complementary by nature and 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 work towards maximizing organ and tissue donations.

To measure the balance achieved by the SOs among organizational needs, the LT administers systematic surveys and reviews of satisfaction and engagement among the workforce, customers, suppliers, and partners. 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; *Figure 2.1-3*) and strategic opportunities. During step 3 of the SPP, the CC, SAs, SOs, and SCs are reviewed and updated to ascertain their fit with the SOs and to ensure that key stakeholders' needs are considered and balanced. A recommended improvement for this process and other SPP processes triggers a PDSA cycle.

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)** APs and their connection to SOs are presented in *Figure 2.1-3*. 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 the SOs, organizational goals, and key APs that are cascaded to the workforce. Some goals are complex enough to warrant multiple 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 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 (see Baldrige Benchmark Project, P.2a[3]), and having a mission-driven workforce (CC) further define the roadmap for LOTS to accomplish its SOs.

To ensure full deployment of APs to the workforce, suppliers, and partners for achievement of SOs, LOTS conducts annual surveys with these stakeholders to gather feedback on the effectiveness of communicating the strategic plan and on improvement opportunities. Results undergo systematic analysis and review in the OMP.



Figure 2.1-3: Strategic Linkages

SOs	Organizational Goals	SC/SA	Action Plan Samples*	Measures	Results	2020 (Short-Term)	2022 (Long-Term)
(1) Maximize Donations OWS	Increase Organ Donors	SC	Implement Expedited Referral Process Partner with DMVs	# organ donors	7.1-4	40	50
	Increase Organs Transplanted	SC		# organs transplanted	7.1-7	125	130
	Increase Bone Donors	SC	Identify and pursue potential partnerships with non-hospital referral sources (e.g., workplaces and faith based organizations)	# bone donors	7.1-8	850	900
(2) Maximize Donations TWS	Increase Tissue Authorization	SC	TWS Outreach and Communication Plan	Tissue Authorization	7.1-18	62%	65%
(3) Maximize Stakeholder Relationships	Sustain Transplant Center Satisfaction	SA	Transplant Center Communication Plan	Satisfaction survey	7.2-1	>4.7	>4.8
	Improve Tissue Processor and Eye Bank Satisfaction	SA	TWS Outreach and Communication Plan—identify and address areas of dissatisfaction	Satisfaction survey	7.2-2	>4.7	>4.8
	Sustain Donor Family Satisfaction	SA	Donor Family Outreach and Communication Plan	30 day and 1 yr surveys, enrollment in closed Facebook group	AOS	92	95
	Improve Workforce Retention Rate	SC	Right Size Workforce Plan (incl. cross training and promoting within)	Workforce retention	7.3-15	80%	85%
(4) Maximize Organizational Excellence	Ensure Connection to Mission	SA	Training, CDP	Survey	7.3-11	100%	100%
	Ensure Supply Optimization	SA	Supply Network management plan	Supply availability	AOS	100%	100%
	Ensure Regulatory and Legal Compliance	SA	Corporate Compliance Plan	Key Regulatory and Legal requirements (Figure 1.2-1)	7.4-4	Full Accreditation/ Compliance	Full Accreditation/ Compliance
	Increase Results of Operations	SA	Budget	\$\$	7.5-1	3.5M	3.6M
	Accomplish Action Plans*	SA	—	% Complete	7.5-14	100%	100%

\*Complete list of Action Plans AOS

**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 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. These processes are reviewed every year during step 9 of the SPP. 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 9 (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 ROI calculations. By being good financial stewards, LOTS has more flexibility to pursue intelligent risks and innovation in support of its mission.

**2.2a(4)** Key workforce plans that support LOTS’s short- and long-term organizational goals and APs include leadership development, skill development, team empowerment, employee engagement, and workforce retention. 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; this ensures systematic learning and improvement of the workforce plan approach. These discussions determine the staffing analysis and consider potential impacts on the workforce, as well as workforce needs for the accomplishment of short- and long-term organizational goals and APs.

**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*). APs and the PMS undergo annual review and cycles of improvement during SPP step 1 (Validate/Revalidate). The organization measures strategic and operational performance through a scorecard system that begins with the Topline Scorecard (*Figure 4.1-2*) and cascades to department scorecards and individual PEPs. The scorecards include a series of key performance measures, arranged to align with the Topline Scorecard. The use of these cascading scorecards reinforces organizational alignment and deployment of SOs and APs to the workforce. AP progress is tracked using a web-based performance management system and the SPP.

Tracking the effectiveness of APs is further accomplished through AP status reviews at LT meetings. APs are updated regularly and 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. During this review, LOTS employs its PDSA process to evaluate and improve its performance projections.

Analysis 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. Systematic gap analysis is used as a specific method to identify performance gaps.

### 2.2b Action Plan Modification

Systematic reviews occurring during work system meetings, LT meetings, and ongoing SDs (*Figure 2.1-1*, step 9) provide the opportunity to identify performance measures that are lagging, to modify existing APs or create new ones as needed, and to ensure cycles of learning and improvement for AP modification. 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 may be performed, depending on the outcome of the analysis. Deployment of APs and modified APs is 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.

Once actions are planned, the linkage back to the higher-level SOs (2.1b), strategic challenges (P.2b), and strategic advantages (P.2b) are validated (see *Figure 2.2-4*). Once AP implementation begins, this linkage is checked in-process and at the completion of the AP. If there is a gap between the intended outcome and what is achieved, root cause analysis is performed to understand the cause and what actions can provide a learning cycle. This approach to strategy implementation has been evaluated and improved several times, with the most notable improvement being the use of a web-based performance management system to track the achievement of APs and to share information across the organization in a timely manner.

---

## Category 3: Customers

---

### 3.1 Customer Expectations

#### 3.1a Customer Listening

**3.1a(1)** LOTS works with four transplant centers and three tissue processors, as well as donor hospitals, an eye bank, medical examiners, and coroners throughout the region. LOTS builds these relationships by offering educational programs, working to understand each organization’s unique challenges and recognizing its life-saving accomplishments. In addition,

LOTS has launched new initiatives aimed at increasing donor authorizations by expanding outreach to community partners, including DMVs and WPFLs.

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, tissue processors,

and eye banks 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 that incorporates surveys and feedback reports and provides results to the survey participants on 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 obtain customer feedback is an online survey.

LOTS has an established website and social media presence on Facebook, Vimeo, Twitter, and Instagram. In addition, LOTS utilizes YouTube for media sharing because of its large selection of tools for viewing, sharing, and embedding digital

media content that includes TV public service announcements (PSAs) and recipient testimonials. Through the YouTube account, LOTS staff address the VOC through monitoring views, comments, and private messages in the same manner as the Facebook and Instagram accounts. Through a cycle of learning, LOTS has embraced the value of social media outlets as a means to share information, answer questions about organ and tissue donation, and encourage donor registration, and it has incorporated these tools into its outreach and communication plans. LOTS focuses social media efforts on communication strategies that strengthen the organization’s brand, reinforce the culture, and celebrate donors and their families.

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*).

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

Method		Frequency M = Monthly O = Ongoing A = Annual Q = Quarterly SA = Semi-Annual	Life Cycle Phase				Customers	
			Pre-Donation	Donation		Post-Donation	Local Organ Transplant Centers	Tissue Processors
				Procurement	Allocation			
Collect ( <i>Figure 4.1-1</i> )	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 ( <i>Figure 1.1-3</i> )	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 <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

**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.

In an effort to increase the number of people in the two-state region registered as organ donors, LOTS has established partnerships with the DMVs in both states, and it is working to establish partnerships with area corporations and organizations, through its WPFL program.

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 approaches, which undergo systematic PDSA evaluation and improvement, allow LOTS to obtain actionable information on its services, customer support, and transactions. Based on survey results from 2016 to 2018 and feedback from the 2019 Baldrige feedback report, LOTS recognized the need to improve its relationships with tissue processors or risk losing those who do not feel engaged by the organization. To better understand these customers' expectations, LOTS followed up the survey with focus groups and one-on-one interviews. These focus groups (held in conjunction with industry events) were also useful in gaining insights from potential customers. These insights were critical in helping LOTS develop its TWS outreach and communication AP. LOTS also developed a TWS outreach and communication AP aimed at strengthening these relationships.

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]) and forms the knowledge base for improvement cycles. At least annually, the knowledge gathered is evaluated to understand whether the customer expectations have changed, and if they have, what actions should be taken.

For example, the idea for a faith-based outreach program and the recognition that donor registration is low in the African-American community came from knowledge sharing with other OPOs.

### **3.1b Customer Segmentation and Product Offerings**

**3.1b(1)** As noted earlier, LOTS's customers and markets are mandated as part of its federally designated service area, meaning LOTS does not determine customers and markets itself; however, the SPP (*Figure 2.1-1*) and the Community Support Determination Process (*Figure 1.2-3*) help LOTS determine and validate customer group and market segments, as well as

community support opportunities. Additional information gathered from the VOC (*Figure 3.1-1*) can also be used to identify and anticipate market segments and their needs.

Every year, during step 9 (Strategic Discussions) of the SPP, the LT and work system leaders review learnings, and the information on customers, markets, and service offerings gathered from the VOC is entered into the PMS for analysis to anticipate future customer groups within the DSA. This approach undergoes systematic PDSA-based evaluation for improvement in customer segment and product offering determination.

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. Beginning in 2014, learning from this information has resulted in the identification of key areas for improvement that are referred to the appropriate level (e.g., LT, front-line staff).

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 every year to determine which customer groups to emphasize for business growth.

Customer groups and market segments are systematically determined during the SPP based on the customers' requirements. Similar requirements are grouped into common customer segments and markets. As part of the internal and external scans, as well as SWOT analysis, LOTS integrates and analyzes data from a Customer Listening and Response System, along with process performance reviews, to identify current and anticipate future customer requirements. Additional analysis is conducted using market data and demographics to determine potential changes in market segmentation. For future requirements or where new requirements emerge, those requirements are assessed to determine if they fit (match) within the existing segments or if a new segment is needed.

**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, and results are validated during the SPP (*Figure 2.1-1*). The OMP is used to systematically analyze the determined customer and market needs and requirements to identify and adapt tissue product offerings and new organ transplant services in order to meet and exceed those requirements (6.1a[3]). These requirements serve as critical inputs for the design of work processes and identification of opportunities for innovation and improvement to consistently meet and exceed customer needs and expectations. For example, based on analysis of customer survey results and feedback from the 2019 Baldrige feedback report, LOTS recognized that there were opportunities for improvement in meeting the needs of tissue processors. LOTS followed up the surveys with focus groups and one-on-one interviews and used the information gathered to develop an AP to improve TWS engagement.

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*). An example of service improvements and refinements are new donor education and other community services at a local Air Force base. Also being looked at are 3D organ printing and new processing partners.

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 innovation and improvement differentiates its services and creates opportunities to expand and deepen relationships with current customers.

LOTS is always alert to potential opportunities for new organ or tissue offerings. While it is true that LOTS is highly regulated and controlled, the regulatory agencies truly wish to provide the best services for a reasonable cost. In this vein, LOTS provides input to them about possible changes. This sequence is typically followed: (1) LOTS listening, (2) analysis, (3) determination of an opportunity, (4) initial discussion with the regulators to determine receptivity, (5) formal proposal developed, (6) proposal submitted, (7) proposal analyzed by regulators, (8) trial approval and test, (9) full approval, (10) live prototype and test, and (11) full implementation.

## 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. This information is also used for systematic evaluation of opportunities and the creation of improvements. 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.

As another example, in the past year, as part of LOTS Donor Family Outreach and Communication Plan, LOTS has completely transformed its support materials to provide a consistent message to the donor families, including "thank you" cards, donor family packets, "navigating grief" support books, email follow-ups, and one-year anniversary cards. LOTS has also created a closed Facebook group for donor families. Online

surveys show donor families with 90 percent overall satisfaction; 74 percent indicated that their satisfaction was because of the efforts, care, and compassion of the LOTS staff.

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 several systematic approaches to build and manage customer relationships. It utilizes the various methods included in the VOC Process (*Figure 3.1-1*) to listen to and interact with local organ transplant centers, tissue processors, and an eye bank to obtain actionable information throughout the Customer Life Cycle (*Figure 3.2-1*). Through the VOC, it collects and reviews customer information. The information is then transferred into the SPP and SDs where trending, risk, and other analyses and validation take place resulting in annual focused strategies and APs to meet/exceed customer requirements, improve service level and satisfaction, and enhance customer engagement. The LT monitors these goals and outcomes through review and analysis of results from annual customer surveys to ensure cycles of continuous improvement.

LOTS conducts a multipronged public awareness program to increase the number of donor registrations in the region and ultimately organs available for transplantation. The program consists of the development and dissemination of materials such as downloadable brochures; radio, print, and TV PSAs; web materials; videos and outreach through social media; and partnerships with DMVs in NT and ST.

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. In response to donor family requests, a private, closed Facebook group was created to allow families to engage with one another and LOTS donor family advocates. 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/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.

Customer support, information resources, media campaigns, branding strategies, and partnerships contribute to build market share. 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.

Another way that LOTS builds and manages relationships with customers, partners, stakeholders, and potential donors is by using a systematic Customer Relationship System, a six-stage process that covers the lifecycle of the relationship. Customer Relationship System levels are designed to move those who are “unaware of LOTS” through “support LOTS and donation” to becoming “advocates” for LOTS and registering to become an organ or tissue donor. Upon becoming advocates, LOTS has the potential to leverage experiences by connect-ing advocates with those who have not heard of LOTS or the benefits of registering as an organ or tissue donor, thereby increasing engagement. Physician referrals to transplant centers and tissue processor are a key focal point for acquiring patients and building market share since a physician referral is a typical driver of where the patient seeks health care. Where physi-cians choose to practice impacts the services that LOTS is able to offer and the quality of the outcomes LOTS can achieve; therefore, LOTS has developed a Physician Partnership System that targets physicians with specific specialties to practice at LOTS. The Physician Partnership System integrates with the strategic challenge of the changing physician culture and further demonstrates LOTS’s core competency. For each stage, LOTS has specific tools, actions, and methods to track progress.

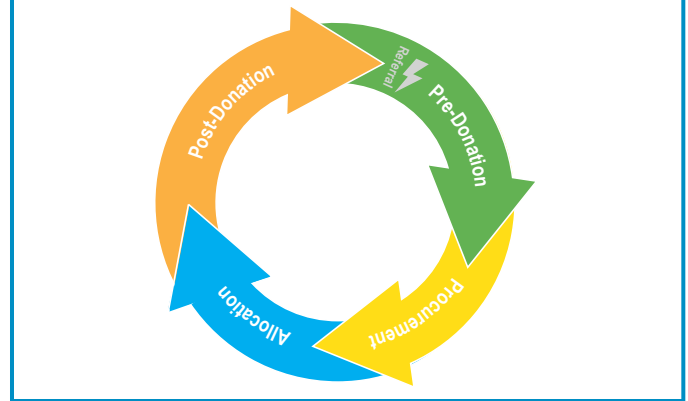
The WPFL is a new initiative that unites LOTS and the organ donor community with workplaces throughout the region to spread the word about the importance of organ donation. Partners include local and regional companies, associations, unions, and community organizations. Their shared goal is to promote organ donation by fostering education and creating opportunities for individuals to sign up to save lives. More than 100 businesses in the two-state area have joined as workplace partners. They have helped register more than 1,000 people. SDs are underway to create a similar marketing effort aimed at faith-based institutions, using the tagline “We believe in life.”

**3.2a(2)** LOTS offers many opportunities for customers 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. Information is also shared through printed materials, educational programs, and community outreach. Methods of customer support do not vary between customers, customer groups, or market segments.

Key customer support requirements are determined through the VOC and validated through the Customer Survey Process, focus group meetings, and informal data gathering that occurs through conversation; requirements are deployed to the workforce via the Communication Process. The Customer Survey Process has undergone learning and cycles of improve-ment and has been supplemented by the use of focus groups and informal data gathering.

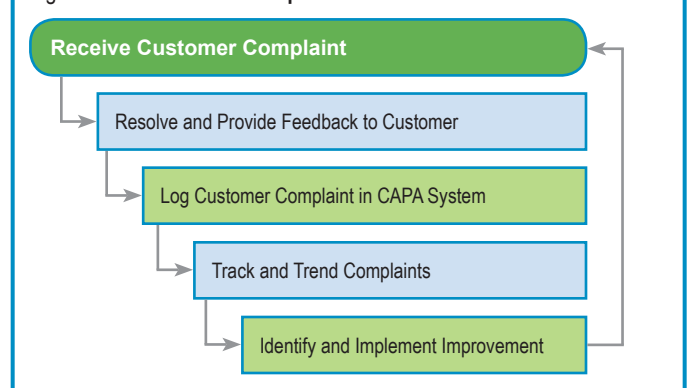
Figure 3.2-1: Customer Life Cycle (Phases)



**3.2a(3)** Customer complaints are obtained via leader round-ing, surveys, focus groups, phone, mail, and social media. 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 7.2-4 and 7.2-4A*). 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, tissue processor, or eye bank complaints or policy/procedure deviations are routed through the corrective action preventive action (CAPA) system for track-ing 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. The Customer Complaint Process is reviewed and improved every year using PDSA methodology. This information is also used as a key driver for the evaluation and improvement of processes where dissatisfac-tion events are occurring.

Figure 3.2-2: Customer Complaint Process



### 3.2b Determination of Customer Satisfaction and Engagement

**3.2b(1)** Local organ transplant center, tissue processor, and eye bank 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 measures customer engagement based on the theory that relationship strength is correlated with customer loyalty, and that loyalty is obtained via those customers who 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.

LOTS uses multiple methods, including surveys, to capture customer dissatisfaction as shown in the VOC (*Figure 3.1-1*). Local organ transplant center, tissue processor, and eye bank 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. 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). Results for both service lines – organ and tissue (including eye)—remain at or near 0% since 2013 (*Figure 7.2-4A*).

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 2018 and 2019. The multiple approaches to gather customer feedback on satisfaction, dissatisfaction, and engagement undergo annual review to improve their design and effectiveness.

**3.2b(2)** LOTS relies on collaboration with other OPOs (P.2a[3]) to systematically obtain comparative data, including their customers’ satisfaction data and information available from AOPO, OPTN/SRTR, and tissue processors. This is part of its systematic comparative data process (*Figure 4.1-4*) that considers additional sources of comparative customer satisfaction data, including data from past Baldrige applications. Due to designation of its service area by CMS, LOTS does not have customer competitors in the OWS, but it uses customer satisfaction comparative data. As a member of AOPO’s Data and Information Management Council, LOTS’s Director of Quality, Bart Wilson, is seeking to obtain information about customer satisfaction with other OPOs and to share best practices for both the OWS and benchmark setting, improvement, and innovation (see Baldrige Benchmark Project, P.2a[3]). In the TWS, through direct contact with regional OPOs and tissue processors, and from the national OPO database for national level comparisons, processors may provide their metrics using industry comparisons. To obtain customer satisfaction relative to other OPOs, LOTS currently uses data from (1) local health care organizations, (2) industry comparisons of customer satisfaction (TWS; described above), and (3) CMS benchmark/comparison data from OPOs who have a similar size, market area, and demographic breakdown.

### 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. This process undergoes systematic review to ensure cycles of improvement and learning and a more effective use of VOC and market data. 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. This includes aggregated data on complaints and data and information from social media. APs to bridge gaps in performance and minimize complaints are deployed to appropriate members of the workforce (3.1b[1]).

All customer relationship processes (3.1a)—including satisfaction and engagement processes (3.2b) and use of VOC and market data (3.2c) processes—go through systematic assessment and improvement cycles, including the PDSA. The frequency is determined by a significant event in the life-cycle of the process or (at a minimum) annually. Process owners are responsible for reporting on their progress using a documented Process Improvement Log, which documents the improvement cycle, as well as the results achieved before and after the improvement.

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

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

#### 4.1a Performance Measurement

**4.1a(1)** Key performance measures are selected, collected, aligned, and integrated in the SPP (Figure 2.1-1). The SPP is also 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 SPP, as well as into key decision-making processes and the OMP (Figure 6.1-1).

LOTS uses the PMS (Figure 4.1-1), which is reviewed at least annually by OWS, TWS, and support service leaders, to support its agility and continuous improvement. Last year, the process underwent a cycle of learning to monitor more efficiently all key business and daily operational processes. 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 to individual performance plans. LOTS tracks progress on achieving SOs and APs by documenting and reviewing scorecard measures, process measures, and personal goals in 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 the 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) is used to deploy and integrate 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)

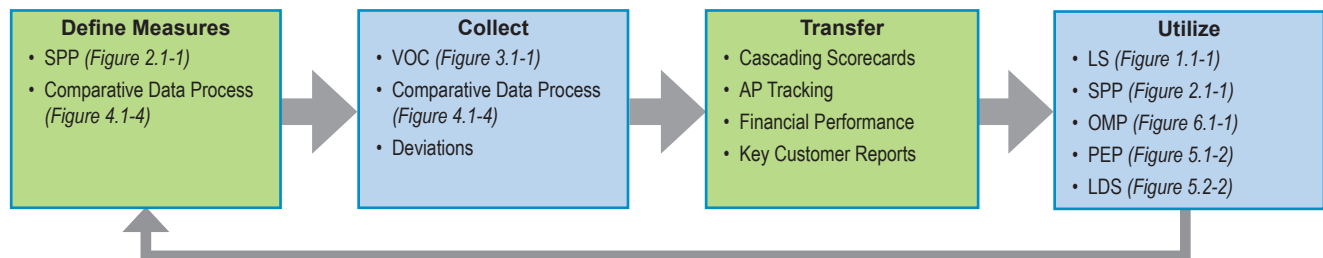


Figure 4.1-2: Topline Scorecard

Key Metrics*	2020 Year-to-Date			End-of-Year Projection		Last Year 2019
	Actual	Target	% Gap	Annualized Year-End Target		
SO#1—OWS						
Organ Donors (7.1-4)	40	50	20%	40	90%	36
Organs Transplanted (7.1-7)	120	130	8%	130	96%	125
Bone Donors (7.1-8)	550	850	35%	1,040	122%	775
SO#2—TWS						
Tissue Authorization Rate (7.1-18)	60%	62%	3%	55%	62%	60%
SO#3—Stakeholders						
Workforce Retention Rate (7.3-15)	80%	85%	6%	80%	85%	80%
SO#4—Org Excellence*						
Supply Availability (AOS)	99%	100%	1%	100%	100%	99%

\*Key financial measures reported in Figure 4.1-3



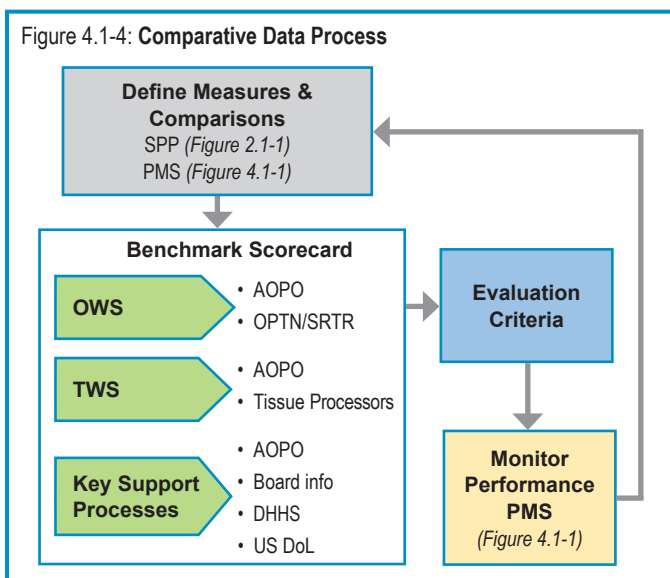
Figure 4.1-3: Key Financial Measures		
Key Financial Measures		
Short Term	Consolidated Results of Operations	7.5-1
	Days Cash on Hand	7.5-9
	Days in Accounts Receivable	7.5-5
Long Term	Operating Reserves	7.5-8
	<b>Total Assets</b>	7.5-10
	Average OAC Comparison	7.5-12

**4.1a(2)** LOTS uses the systematic Comparative Data Process (Figure 4.1-4) to select and effectively use key comparative data and information for target and benchmark setting, improvement, innovation, and operational decision making. This Comparative Data Process starts with the output of the SPP and the selection of key performance measures. LOTS determines if the comparison is valid based on validation of the process and the method used to capture the data. LOTS ensures organization-wide effectiveness by selecting and using comparisons at every step and at every level of the organization.

In the Comparative Data Process, which relies on data-sharing collaborations, LOTS gathers comparative data in the organ, tissue, and support process fields from other OPOs, tissue processors, eye banks, Baldrige Award recipients, and related organizations during the Benchmark Scorecard step (Figure 4.1-4). Once collected, the comparative data are evaluated, prioritized, selected, and incorporated into the PMS (Figures 4.1-2, 4.1-3, 4.1-4) and periodically reviewed by the OWS, TWS, and support service leaders.

Data become part of the feedback to define, measure, and compare results. Performance is then monitored, feeding back to planning. The gap between what is and what could be drives improvement strategies. Then updated plans connect to the Comparative Data Process to close the loop.

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 7.1-20). 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; LOTS reviews and selects the key indicators that best align with its strategic plan and objectives to target, as well as support decision making and enable opportunities for performance improvement and innovation.

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).

LOTS's organization-wide long-term goals are set at the top decile nationally (or higher if currently at top decile), and short-term/annual goals build to the top decile. The BOD has ultimate approval of all goals as part of the SPP.

Comparative data must be valid and drive performance excellence. When an improvement or innovation is needed, a review of the available sources is performed to support PDSA with appropriate tools. In addition to the process above, LOTS also uses a Benchmarking Hierarchy to determine what types of comparisons can be used if national top-decile comparisons are not available (e.g., top quartile, national average) to ensure that the best available comparison is used. The hierarchy is part of the Baldrige Benchmark Project (P.2a[3]).

**4.1a(3)** LOTS uses PDSA for annual reviews of the PMS (Figure 4.1-1), which is modified as appropriate during the SPP and OMP, ensuring that the organization's PMS is current and constantly adapting to evolving accreditation, regulatory, operational, and financial needs and requirements. Each year during the SPP, the LT evaluates the scorecard measures and goals and makes necessary changes to support the SOs and to address the competitive and regulatory landscape. Frequent, scheduled performance reviews during work system meetings help to alert the LT when a key process or system is not performing to goal; this approach enables timely corrective analysis and action, and also allows for the addition of new measures throughout the year if a new process is implemented or significant process redesign occurs. Annual evaluation of the PMS and frequent, scheduled reviews of organizational performance ensure that

the organization and its PMS are able to respond to rapid or unexpected organizational or external changes. In addition, monthly environmental updates, conclusions, and improvement recommendations arising from ODs and SDs and within the work system meetings are reviewed for impact (*Figure 6.1-1*). The formal, PDSA improvement methodology, in conjunction with the organizational structure (*Figure 1.2-2*) and ongoing SDs, ensure that the organization remains agile and able to respond quickly to PMS-related issues that may arise in order to provide timely data.

Reviews address all timeframes, including real-time, hourly, daily, weekly, and up to annually. Every review assesses whether LOTS has the data needed to make decisions in a timely manner. If new changes are in a timeframe that is not addressed with the current measures, staff members at every level of review have the authority (and the responsibility) to add or change measures to ensure the needed agility. This is in accordance with the process described in 4.1a(1) and is documented in our training material of "How to Review Performance at LOTS."

#### **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. LOTS compares performance, progress, and success to Baldrige Award recipients and AOPO benchmarks, when benchmarks are available. These reviews help to 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 robust analyses and analytics, including comparative, quantitative, root cause, trend, variance, and correlation analyses. 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 as part of 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 approach helps ensure that (1) performance is assessed using a balanced set of measures, (2) measures are aligned with strategy, (3) performance results are analyzed, and (4) opportunities for improvement are identified. 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 key financial measures at regularly scheduled meetings. The CEO reports on gaps in performance and progress 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 and SDs in the OMP (*Figure 6.1-1*) to identify opportunities for improvement and innovation, focusing on areas where significant gaps have been identified or major changes are anticipated. Findings drive the development of priorities for continuous improvement and innovation. Priorities and opportunities are shared with the workforce and, when appropriate, with LOTS's suppliers, partners, and collaborators through the OMP and the Communications Process because LOTS recognizes that innovative ideas may come from any of these groups. If indicated, a multidisciplinary team may be identified to look at possible opportunities (see 2.1[2]). (Suppliers and collaborators are included on teams, as appropriate, to ensure organizational alignment.) The teams develop ideas that are vetted through the LT for prioritization and disposition as part of the IMP (*Figure 6.1-3*). The Innovation and Risk Board (2.1a[2]) is used to vet and approve large system-wide innovations.

The SPP and findings from performance data in the OMP (*Figure 6.1-1*) are used to develop priorities for continuous improvement and opportunities for innovation. Input received from stakeholders and environmental scanning is also used to identify opportunities for improvement and innovation in areas related to in-process and outcome measures. Goals for LOTS's key measures address the need for (1) improvement (using PDSA), (2) design/redesign of processes (using PDSA for design), and/or (3) innovation. Where projections of future performance through performance reviews show an inability to achieve goals, a 90-day AP is put in place using PDSA for improvement. If projections of future improvement show that rapid cycles of improvement may not achieve the goal, PDSA for innovation is used. Performance review findings can also trigger a 90-day AP.

Performance reviews may include participation by key suppliers, partners, and collaborators. Contractual relationships with key suppliers, partners, and collaborators include quality and operational discussions, which are aligned in the OMP with SDs among leadership and units. Selected approaches supporting

SOs and goals are subjected to risk analysis to identify intelligent risks worth pursuing in support of innovation. When determined by the LT, a team is identified to pursue via APs the new innovation opportunities or look at other opportunities (see 2.1a[2] and 4.1c[2]). 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. The processes to analyze/review organizational performance and utilize the findings to prioritize continuous improvement and opportunities for innovation undergo annual review via PDSA by work groups with input from suppliers and partners to ensure cycles of learning and improvement.

## 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.

**4.1a(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 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. The efficiency and effectiveness of LOTS's processes used to ensure the quality and availability of organizational data and information are assessed by the QS department using the PDSA methodology to ensure yearly cycles of learning and improvement.

### 4.2b Organizational Knowledge

LOTS relies on electronic means, as well as personal communication, to manage and improve 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 with 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 EMR (Transplant Technology). For example, combining the SRTR data with the Transplant Technology data to analyze 2018

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
Collect (Figure 4.1-1)	Operational Discussions	O		•	•	•	•	•	•	•		•
	Supplier Meetings	Q, W					•	•	•	•		•
	Strategic Discussions	O			•	•	•	•	•	•		•
	Participation in SPP (Figure 2.1-1)	O			•		•	•	•	•	•	•
	Rounding/PEP (Figure 5.1-2)/ LDS (Figure 5.2-2)	O										•
	Surveys	O	•	•	•	•				•		•
	Audits, Internal/External	O			•	•	•	•	•	•	•	•
	Social and Electronic Media	O	•		•	•		•			•	•
	Corporate Compliance Process (Figure 1.1-2)	O	•		•	•	•	•		•	•	•
	Contracts	O	•		•	•	•	•	•	•	•	•
CAPA/Deviations	O	•	•	•	•	•	•		•	•	•	
Transfer (Figure 1.1-3)	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 (Figure 2.1-1)	O	•	•	•	•	•	•	•	•	•	•
	Survey Feedback/Baldrige Feedback/ Annual Report	A	•	•	•	•	•	•		•	•	•
	CAPA/Deviations/Corporate Compliance Process (Figure 1.1-2)	O	•	•	•	•	•	•	•	•	•	•
	Best Practice Sharing	O	•		•	•	•	•	•	•	•	•
	OMP (Figure 6.1-1)	O	•	•	•	•	•	•	•	•	•	•

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)** LOTS systematically strives to move toward best-practice performance in all areas. When an internal goal is met or exceeded (where LOTS can identify organizational units or operations that are high performing), a re-evaluation is conducted on how to reach the mission and stretch toward a goal or benchmark. High-performing units are responsible

for documenting how they exceeded performance in a manner that can be scalable to other units. Best-practice sharing is a combination of the knowledge management techniques for sharing best practices across the organization and a wide range of systematic sharing techniques within each discipline. For example, LOTS identified a process to address family needs prior to approval for a donation. This process was shared not only across LOTS but across the industry and resulted in refinements that led to higher levels of satisfaction for families. Examples of best-practice sharing tools include an internal shared drive, a Wiki of best practices, and an intranet with functional team rooms. In addition, during reviews of performance, best practices are identified and shared through integration teams, management councils, shared governance facility councils, senior leader meetings, quality councils, and system improvement teams. For the various functional areas (both clinical and nonclinical), more than 100 sharing councils or forums are used. These forums are a normal part of how each function operates and integrates.

The systematic scorecards, Comparative Data Process within the PMS (*Figure 4.1-1*), and the Voice of the Stakeholder (*Figure 4.2-1*) provide the tools used by the organization's workforce to monitor organizational performance and identify best practices for sharing and incorporation into SOPs by the OWS and TWS team leaders. LOTS uses the OPO performance data regularly tracked by tissue processors on scorecards to support operational decision making, the meeting of requirements, and the identification of best practices. As a result, for example, LOTS has met and exceeded the Tissue Transformations requirement for average usable skin yield per donor, which has been identified as a best practice leading to sizeable day-to-day improvements (*Figure 7.1-23*). Another identified best practice is the modified donor prep procedure to minimize the bone contamination rate.

In addition, LOTS identifies best practices after monitoring monthly gaps in performance for remedial action at the individual level. Identified best practices are then shared at OWS/TWS meetings. LOTS voluntarily participates in accreditation councils in order to exceed standards. Accreditation inspections assist the organization with identifying performance gaps in practices. Participation on the councils allows for the identifying and sharing of information and best practices to proactively evaluate and improve operations. Approaches to systematic knowledge management and identification of best practices based on the above processes for sharing undergo annual review and improvement using the PDSA methodology. 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 in both daily operations and strategically 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 7.1-5*) 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)** Demonstrating a focus on the values of quality and innovation, LOTS ensures that new learnings are continuously embedded in day-to-day operations and strategic direction. Organizational learning is systematically embedded in LOTS's operations through the LDS (*Figure 5.2-2*), which is aligned and integrated with multiple organizational work processes. Organizational learning is also embedded in the organization

through adoption of best practices and changing policies and procedures as a result of continuous improvement. Through the various sharing forums, LOTS captures changes for additional improvements. Furthermore, each process owner has the responsibility to improve his/her processes contributing to organizational and personal learning and innovation.

Once the workforce learning and developing needs are captured in RFO, new knowledge, required skills, and knowledge sharing are reinforced through well-established competency testing, work system discussions, training sessions, the Communication Process (*Figure 1.1-3*), and the PDSA methodology for process improvement.

Organizational learning is linked to expected outcomes in employee goal plans, data-driven decisions ensure that key processes are systematically measured, and performance results are evaluated and used to drive improvement. Both outcome and in-process measures are defined for each process, and progress is evaluated through performance reviews and further enhanced through best-practice sharing.

Regular training offerings are selected and deployed throughout LOTS after analysis of staff feedback and organizational gaps, and in response to personal learning goals identified by staff members. To facilitate the transfer of knowledge among the workforce, staff members assist in training where appropriate and feasible. Knowledge sharing is a standing agenda item in work system meetings. For example, an improvement team was used to increase satisfaction with staff meetings, resulting in the addition of manager report-outs and a Q/A session with the CEO at each meeting. The effectiveness of the LDS in contributing to embed learning to help solve problems locally and bring about meaningful change is PDSA-assessed and improved every year, and key learnings and critical knowledge are captured and housed within the electronic PMS system for easy access to information and tracking of approaches that have been adopted in other areas. In addition, knowledge transfer is supported by expanding work instructions, SOPs, forms, and processes, which are especially critical in clinical areas.

Strategic opportunities are identified by comparing the gaps and the strategic challenges. Analysis and decisions during the SPP and the actions to address the gaps support intelligent risk taking through a validation of goals (including their priority) and strategies from internal and external stakeholders designed to close those gaps or meet those strategic opportunities. Based on this validation, senior leaders make the determination of which strategic opportunities they will pursue based on cost, risk, and benefit.

---

## Category 5: Workforce

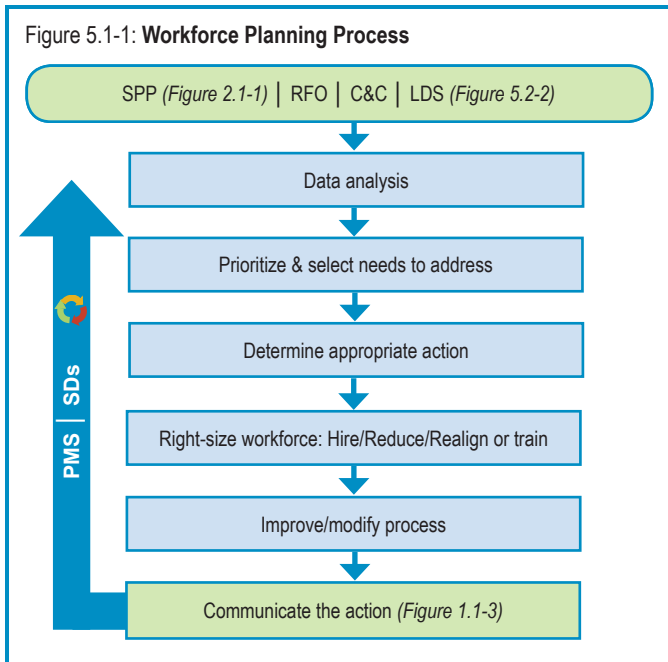
---

### 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*). Workforce capability needs

are defined in terms of knowledge, skills, abilities, and specific competencies, and capacity needs are determined by assessing the amount of work and the number of people required for each role. LOTS has identified the skills and competencies that are

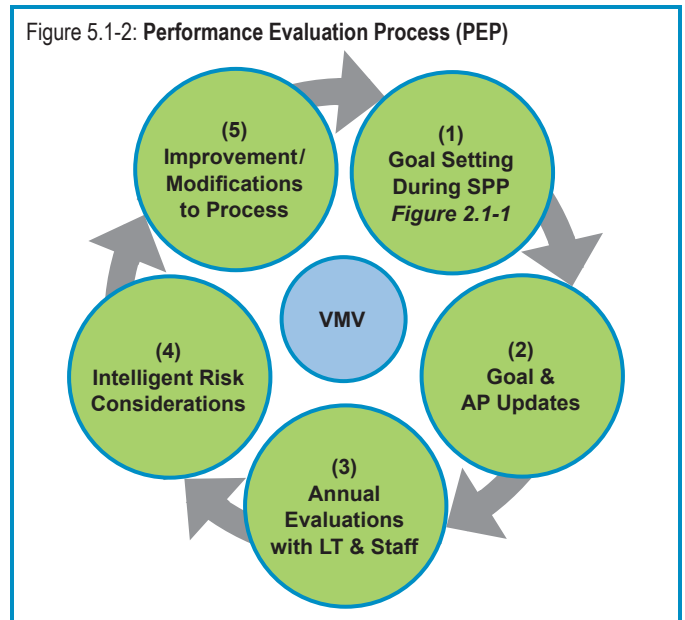


needed to perform each role within the organization successfully. To better define capability, LOTS identifies necessary skills in job descriptions, and job competencies, which are supported by job descriptions, are monitored through the PEP (Figure 5.1-2). In addition, job descriptions are periodically updated based on emerging technologies and strategies. 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.

Changing technology has also resulted in the need for changing in-house capabilities. For example, the growing importance of social media resulted in the hiring of a public relations communication professional to lead LOTS'S social media outreach efforts. In addition, the LT determined that additional cybersecurity IT expertise was needed to implement the National Institute of Standards and Technology's (NIST's) *Framework for Improving Critical Infrastructure Cybersecurity* (CSF).

**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, LOTS's mission is the highest scoring key factor for workforce 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). Through systematic C&C meetings, LOTS identifies workforce needs during the initial stage of the Hiring Process. To ensure that the workforce represents the diverse cultures of the community, LOTS uses diverse recruiting methods, including local community colleges and universities, behavioral interviewing, social media sites, and after-hiring shadowing and mentoring to ensure a strong cultural fit. 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. Such hiring systematically ensures that LOTS is recruiting across a wide base and hiring the best person who fits the culture and the culture of the organization's customers.

LOTS's recruitment strategies use behavioral and team interviewing to ensure that the cultural mix is appropriate. Referrals by workforce members also contribute to the pool of applicants. Last year, 20% of all new hires were referred by a workforce member, an indicator of high engagement. As part of the Hiring Process, OWS and TWS managers and Human Resources (HR) personnel review the gathered information from behavioral-based interviews, values assessments, and other approaches, and they evaluate the final job candidates for diversity reflecting the hiring community and for cultural fit regarding customers' and LOTS's values, ideas, and needs. To enhance the cultural fit of new recruits, LOTS gives special consideration to job applicants who are currently working with local hospitals, tissue processors, and eye banks and who are familiar with and match the needs of LOTS's customers. The Hiring Process is PDSA-reviewed annually by HR to ensure cycles of learning and improvement.

As part of supporting the community (1.2c[2]), a gap in serving the local Air Force base was noted. LOTS has become part of a community program serving the employment needs of military spouses, who often have a problem in gaining area employment. Hiring from this source had the effect of providing a more diverse workforce for LOTS.

The fit of organizational culture with new workforce members is ensured in the hiring and onboarding processes through several recent changes, including shadowing and behavioral-based interviewing practices. Improvements also include incorporating a conversation about values into the in-person interview to help ensure the fit of new workforce members with the organizational culture. As part of the on-boarding process, new workforce members receive information online prior to starting the job. In addition, a peer-mentor is selected from a work team similar to the one that the new workforce member will be joining. The peer-mentor serves as a resource for policies, procedures, and paperwork and is encouraged to meet regularly with the new workforce member. Shadowing assignments create bonds between LT members and new employees, and they help provide the new employees with a broader understanding of the MVV. In redesigning its process for recruiting and hiring new workforce members, LOTS gave particular attention to survey results suggesting that members of GenZ are looking for employers who have a purpose, and that they value face-to-face time at work with mentors and with a network of peers and other individuals who share a common purpose and passion.

**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. Every year, the LT analyzes current and future workforce and organizational needs and reviews C&C information along with onboarding and stay and exit interview data. Then workforce plans are captured within step 5 (Assess) of the annual SPP. This is followed by C&C meetings and RFO to gather information about changing C&C requirements and needs, including workforce growth, and the preparation of the workforce for changes in C&C needs through the Workforce Planning Process (*Figure 5.1-1*). In this process, data from the SPP, workforce plans, C&C meetings, RFO, and LDS are analyzed, and the appropriate workforce-related needs and actions to address C&C changes are determined in order to right-size or train the workforce. This process helps LOTS manage the needs of the workforce and the organization, ensures continuity, prevents workforce reductions, and adjusts for periods of growth (2.2a[4]).

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. Where possible, staffing levels are benchmarked, and adjustments are made to enable operational efficiencies across the Workforce Planning Process and other processes. For example, strategies to achieve desired levels of organizational C&C to address recent growth in organ and tissue donation include a greater emphasis on cross-training and promoting from within. The workforce environment is systematically reviewed by HR using the PDSA methodology to maintain cycles of learning and improvement. This approach helps ensure continuity of operations and retention of outstanding workforce members (*Figure 7.3-15*).

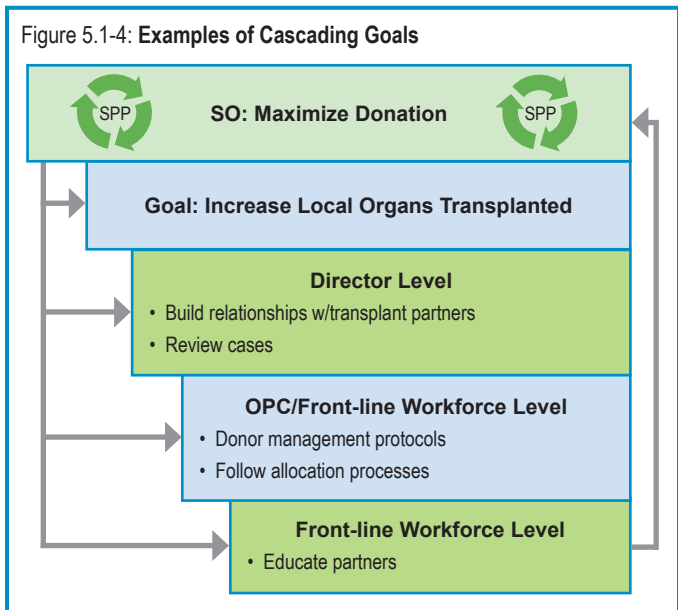
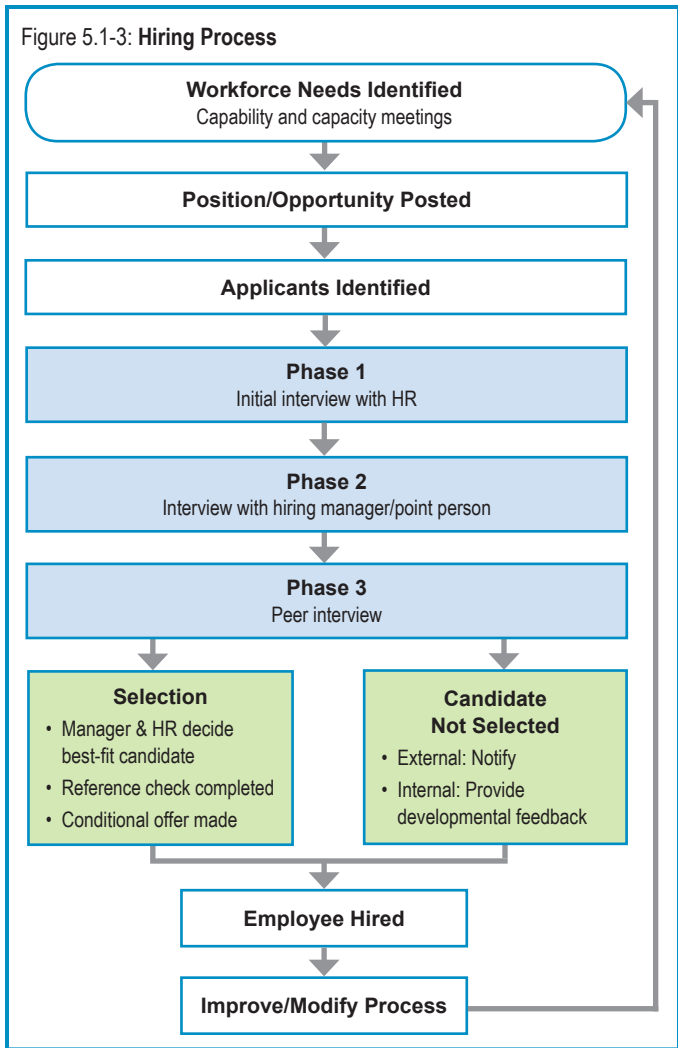
To prevent workforce reductions, LOTS forecasts workforce capacity needs (*Figure 5.1-1*) in both the short- and long-terms and hires to those needs. As a cycle of improvement, LOTS has created and launched a resource pool to address staffing during growth periods. LOTS hires staff members who are permanently necessary using the standard recruit, hire, place, and retain processes (5.1a[2]). To prepare the workforce for changes in organizational structure and work systems, LOTS communicates strategic direction through the communication methods, department meetings, and one-on-one meetings. These techniques systematically translate the LOTS's SOs to each employee's responsibilities. Changing needs are identified during the SPP and incorporated into workforce plans. Changes in organizational structure that change work needs are addressed through the SPP and the resulting workforce plans. These processes are updated annually, and the primary focus is to ensure that LOTS is meeting workforce needs, as identified in *Figure P.1-6*.

LOTS's leaders prepare the workforce for changing capacity needs by (1) cross-training, (2) ensuring that all key positions have a succession plan, (3) using a resource pool, (4) using agency personnel in periods of significant demand, and (5) not hiring unless the long-term need is validated. Changes in workforce capability are addressed through identification of workforce strengths/gaps related to documented job requirements and competencies, as well as changes identified through the SPP. These are addressed formally during the PEP (*Figure 5.1-2*).

To ensure that LOTS understands and manages workforce needs, the organization has numerous workforce listening posts (see *Figure 1.1-1*), and LOTS ensures continuity through the PEP Performance Conversations Process. The PEP Performance Conversation Process is where leaders identify and re-recruit high performers to raise the bar for those meeting expectations, and leaders provide coaching and performance improvement plans for those who are not meeting expectations. This is an opportunity to recognize/reward and re-recruit those who meet expectations or create a training and development plan. Where the individual or organizational need exists, LOTS effectively trains, rewards, and re-recruits high performers and trains them to expand the skills of solid performers.

**5.1a(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. Continuity of processes is ensured for both new and long-term workforce members through training, education, frequent communication, SOPs, and cross-training.

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*), which 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 ensures that training for performing daily tasks meets customer needs. In alignment with that training, 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 7.2-5).

The SPP (Figure 2.1-1) is used to create focus, establish priorities, and set 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 7.3-7) 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 7.1-29), 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.

In a cycle of learning, it was recognized that these efforts to ensure workplace security did not include off-site workforce members. 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 workforce 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 7.1-28). These performance measures are designed to



Figure 5.1-5: Workplace Environment		
Factors	Measures	Results
Health	EAP	AOS
	OSHA Compliance	7.3-9
	Wellness Program Participation	7.3-7
Security	Training	7.1-29, 7.1-30
	Safety Drills	7.1-31
	ERP	AOS
	Safety Measures	7.1-32
	Security Measures	7.1-29
Accessibility	ADA compliant	AOS
	EEOC compliant	AOS
	IT resources	AOS

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

LOTS supports its workforce by providing a comprehensive insurance benefits 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 plan, Extended Medical Bank 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.

The range of benefits and services offered by LOTS was developed in response to workforce surveys and focus groups, which identified benefits as a key workforce requirement. Employees who choose the workforce engagement driver of benefits in the 2019 workforce survey scored their satisfaction at 89%, exceeding the industry comparative (*Figure 7.3-17*). 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. Beginning with the 2017 survey, the new vendor, Excel Employee Engagement, allowed the staff individual selection of satisfier and engagement drivers. 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. Across all workforce groups and segments, key drivers of workforce engagement continued to be the commitment to the mission, coworkers, and benefits.

**5.2a(2)** LOTS assesses workforce engagement through the workforce survey. Through learning and 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 2019 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 allows measurement of engagement across workforce groups and segments, including work system, tenure, and department, so that each workforce segment can review its results in detail. Other engagement indicators include retention rates and clinical staffing levels.

Workforce retention is measured on the Topline Scorecard and has remained a priority (*Figure 7.3-15*). 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). 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

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	✓	✓	✓
★	★	III recognition	✓	✓	✓
★	★	Peer-to-peer recognition	✓	✓	✓

Process (Figure 1.1-3), RFO fosters open communication. The workforce survey noted satisfaction with clear, effective communication at 75%, exceeding the health care median by 15%. 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 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 “Cafe 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), which includes rewards/recognition for intelligent risk/innovation as part of III recognition. 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 2019, staff members scored their connection to the mission at 95%, the highest of all 22 engagement drivers, exceeding the health care median benchmark (Figure 7.3-11). In addition, values are part of the PEP (Figure 5.1-2) and are highlighted at various staff meetings to demonstrate how that value may be applicable in day-to-day work. 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—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 7.2-5).

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 2018 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 Management System (WPMS) and the PMS (Figure 4.1-1) support high performance, engagement, and intelligent risk-taking in the workforce and LT. In addition, the fully deployed PEP (Figure 5.1-2) consists of several layers that are structured and systematic, complements the above systems in supporting high workforce performance. Through the WPMS and 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. The WPMS includes a process to incentivize, support, reinforce, and reward intelligent risk-taking among the LT and OWS/TWS leaders when considering strategic opportunities for innovation.

While staff members name the mission, coworkers, and benefits as the highest-scoring engagement drivers, 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).

Personal growth and learning are also strong values for many workforce members. The PEP, via the LDS (*Figure 5.2-2*), is used to evaluate program 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 and performance improvement, organizational change, the determination of strategic opportunities that are intelligent risks worth taking for innovation, and risk taking 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*) and the LDS. The LDS supports organizational performance improvement and intelligent risk taking through its Learning phase, specifically the On-the-Job Training, Industry Conferences, and Industry Networking components. Decisions and transfer of intelligent risks and innovations occur during the Knowledge Sharing phase.

The IMP (*6.1-3*) and the Innovation and Risk Board (2.1a[2]) are used to ensure that LOTS is taking appropriate (intelligent) risks to significantly improve the PEP and learning development. The results of these risks are measured and reported to the BOD annually.

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, development of decision-making skills, and the development of intelligent risk taking.

LOTS's approach to leadership development was modified in 2019 in recognition of the need to retain outstanding workforce members and promote from within to address the growth in organ and tissue donations. Additional emphasis is being placed on cross-training to ensure that workforce members have opportunities to learn and the organization has a more agile workforce. On-the-job-training offers a cost-effective way to cross-train and to link training more closely to LOTS's capacity needs and priorities, resulting in future leaders with a broader understanding of organizational needs.

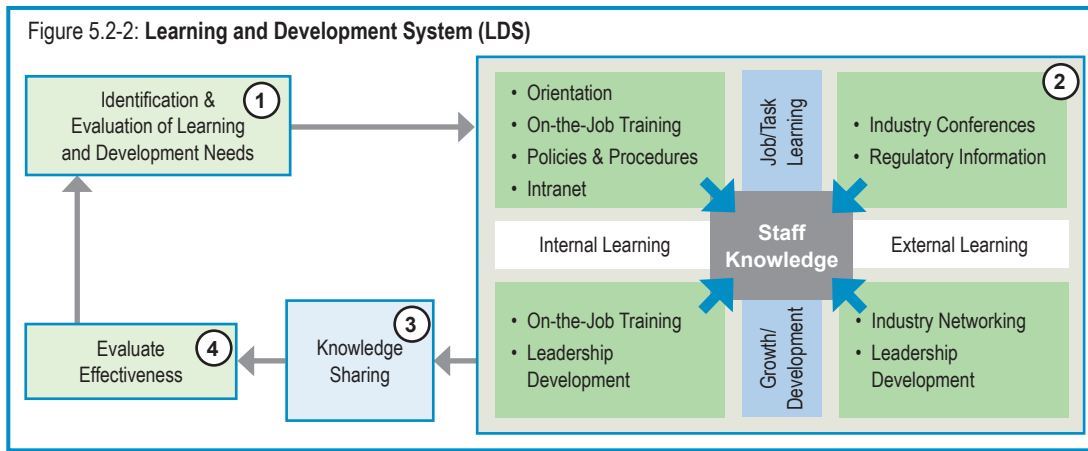
To support ethics and ethical business practices, annual policy training includes review of the COI policy, Code of Professional Conduct, Corporate Compliance Training, and ongoing procedural compliance. The LOTS workforce is educated on the organization's legal and regulatory requirements through mandatory 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 to assess performance.

With the recent addition of the Innovation and Risk Board and process, a course was established and conducted with all employees on innovation and intelligent risk taking.

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 workforce success, which in turn drives organizational sustainability and supports the CC of a mission-driven workforce. To increase its effectiveness, the LDS system (*Figure 5.2-2*) is systematically validated as part of the SPP and improved through root-cause analysis and the PDSA methodology. Past improvements have included the addition of skills days and a formal exit interview process. In the 2018 workforce survey, on the engagement driver of continuous learning, training, and development, results showed an 82.6% satisfaction level with training and development, exceeding the health care mean



opportunities and cross-training must be provided for all staff and leaders every year in alignment with the strategic plan and workforce plans. At LOTS, most job- and career-related development involves job enhancement opportunities within the organization. Both the internal and external learning components of the staff knowledge

(*Figure 7.3-18*). This is one of the approaches LOTS uses to evaluate the efficiency and effectiveness of the LDS.

HR staff members evaluate the effectiveness of training, including by looking at quality goals (evidence-based measures) and service goals (experience outcomes). The courses that directly impact goals are carefully evaluated, and some include “proof of learning” through the appropriate licenses or certifications. The use of rubrics also allows LOTS to evaluate the effectiveness of training by correlating the learning and development outcomes with results of customer satisfaction and the findings of workforce satisfaction and engagement. In addition, HR systematically applies use of the Kirkpatrick Model’s four levels of learning evaluation where results are evaluated regarding satisfaction, knowledge/skills increase, adoption level, and impact on the business model (levels 1–3). Where these correlations are not strong, LOTS identifies opportunities for improvement in learning approaches used, development approaches used, and/or approaches needed to strengthen workforce engagement.

Depending on the nature of the training, learning efficiency is linked to an outcome measured in the performance plan for each employee. Staff members who attend training off-site complete formal evaluations of the training attended and the outcomes that resulted. They also are asked to share the information they learned at department, work system, or LT meetings to help other team members gain insight from the training. Information from these evaluations is used to determine which external training vendors to continue using, which to delete, and what topics to obtain from other vendors. This step has resulted in improvements in measurable outcomes from external training. Further, an analysis was added this year that correlates staff members’ completion of courses in the LDS and performance in identified areas in the PMS.

In addition, LOTS evaluates the efficiency of the LDS by conducting evaluations of internal and external opportunities, and comparing the results to affording employees’ the opportunity to provide feedback about the training they expected and received; this process is also used to identify any industry training needs of interest that will support the mission (*Figure 5.2-2*, step 4).

**5.2c(4)** LOTS uses the LDS to manage career development planning (CDP) for the workforce and future leaders. A BOD policy stipulates that professional and personal development

step of the LDS include leadership development and career support for leaders and staff members who are identified by the PEP (through annual HR capability reviews, key system leader surveys, and LT recommendations) as high performers so that they can utilize their skills, knowledge, and abilities in various ways at their same or higher career levels. and mentoring and formal development through CDP.

Due to the organization’s size and structure, CDP is often supported in horizontal transitions to different roles, managed through biannual discussions by a committee composed of representatives of the LT, OWS, TWS, and support systems. Over half of the workforce is in a different position today than originally hired for, and many of those employees have transitioned multiple times. The PEP helps identify high performers who can utilize their skills, knowledge, and abilities in various ways. CDP is further used to help employees develop specific skills and knowledge to enable progression to other career opportunities.

The LDS is also used to prepare the workforce for replacement and succession planning. Succession plans are 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 plans focus 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 understanding of team dynamics, handling difficult conversations, and team motivation.

Emerging leaders are identified through the PEP, and if they are on succession plans, they have an individually developed plan for their leadership development and growth. All employees understand: (1) their job requirements; (2) their current performance; (3) the gap between #1 and #2, above; (4) what needs to be done to improve; (5) the access they have to the development they need; (6) the requirements of a desired job; and (7) the access they have to develop toward the desired job.

## Category 6: Operations

### 6.1 Work Processes

#### 6.1a Product and Process Design

**6.1a(1)** Key work product and process requirements are determined by analyzing customer and stakeholder inputs and requirements, regulatory and compliance requirements, and organizational requirements like the MVV and SOs. Customer and stakeholder input is obtained 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 the 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, and the hospital partner satisfaction exceeded prior years (*Figure 7.1-2*)

**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.

In the ODs of the OMP, process owners meet with the process customers. This is for both key work processes that have external customers and support process that have internal customers. A Customer Agreement Process is used

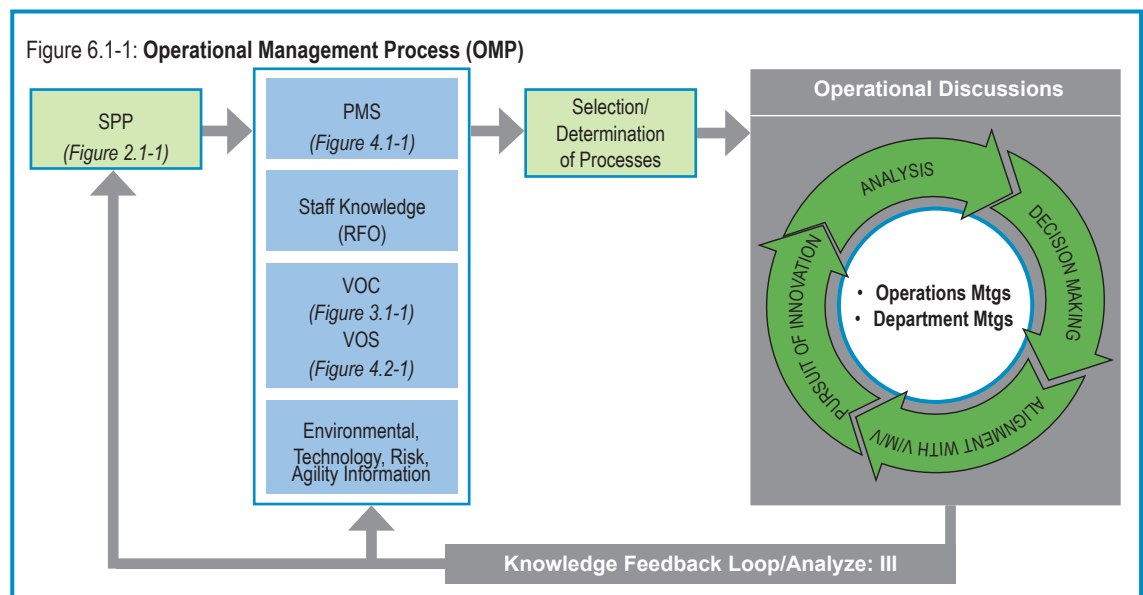
to ensure that owners and the customer systematically evaluate relevant factors for cost, efficiency, and effectiveness, including cycle time, productivity, rework, and the other factors shown in 6.2a. The form and process ensure that the owner and customer systematically address these issues and both sign off that they understand the requirements.

**6.1a(3)** The OMP (*Figure 6.1-1*) demonstrates the methods used to design, refine, and construct key work processes to meet requirements. Through the OMP's use of RFO; the VOC; the VOS; and environmental, technology, risk, and agility information, internal and external factors are considered to ensure that new and appropriate technology, agility, customer value, and key requirements drive work processes that are systematically analyzed, reviewed, and translated into priorities. In addition, the need to incorporate organizational and workforce knowledge to make newly designed work processes successful is assessed during the OMP; work process effectiveness is evaluated post implementation during step 4 of the LDS (*Figure 5.2-2*). These considerations are evaluated for improvement 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 workforce members drive organizational improvements and innovation using the SPP, OMP, and PMS (*Figures 2.1-1, 6.1-1, and 4.1-1*), as well as the PDSA methodology (P.2c) to assess performance, look for opportunities for improvement and innovation, 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, workforce knowledge, and stakeholder and environmental information, to ensure that key requirements are met. Within the OMP, the PMS (*Figure 4.1-1*) is used to ensure 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, workforce 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 6.1-2A](#). 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)** LOTS's key support processes and in-process measures used for the control and improvement are outlined in [Figure 6.1-2B](#). The OMP ([Figure 6.1-1](#)) demonstrates the process used to determine the key work system requirements to select and construct the key support processes, based on the PMS, staff knowledge, the VOC, and other information. Key support processes are Laboratory Testing, Donor Chart Review and Release Process, Supply and Equipment Management, Financial Management, HR Management, IT Management, PI, and Quality Compliance Management, which are determined by the need to maintain the successful operation of the key work processes involved in the OWS and TWS. This need aligns to the requirements and design of support processes (determined during ODs and feedback analyses). Day-to-day operation of the support processes and the ability to meet key business support requirements is ensured by the OMP ([Figure 6.1-1](#)). This approach is annually reviewed for improvement.

Figure 6.1-2A: Key Work Processes

PHASE	PRE-DONATION				DONATION		POST-DONATION	
Key Work Process	Referral Management		Authorization		Procurement/Allocation		Post-Donation	
Work System Alignment	OWS	TWS	OWS	TWS	OWS	TWS	OWS	TWS
Key Requirement	Hospital	Hospital	Referrals	Referrals	Organ Donors	Tissue Donors	Consistent message to the donor families (Donor Family Outreach and Communication Plan. 3.2a[1])	Consistent message to the donor families (Donor Family Outreach and Communication Plan. 3.2a[1])
Results	Partner Satisfaction OWS (7.1-2)	Partner Satisfaction TWS (7.1-2A)	(7.1-1)	(7.1-2)	(7.1-4)	(7.1-3)	(AOS)	(AOS)
Key In-Process Measure	Missed Organ Referrals (7.1-16)	LOTS Tissue Approach Rate (7.1-17)	Organ Authorization (7.1-5) 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)	Follow-ups, memorial service attendance (AOS)	Follow-ups, memorial service attendance (AOS)
Key Outcome Measure	Organ Referrals (7.1-1)	Tissue Referrals (7.1-3)	Local Organ Donors (7.1-4) Organ Conversion (7.1-20)	Total Tissue Donors (7.1-6)	Local Organs Transplanted (7.1-7)	Skin Donors Released (7.1-9)	Donor family satisfaction (AOS)	Donor family satisfaction (AOS)

Continued.

Figure 6.1-2A: **Key Work Processes** (continued)

PHASE	PRE-DONATION				DONATION		POST-DONATION	
How Determined • Regulatory	CMS	FDA	CMS UNOS/ OPTN UAGA AOPO	UAGA AATB	VOC (3.1-1) UNOS/ OPTN AOPO	VOC (3.1-1) AATB	VOC (3.1-1)	VOC (3.1-1)
Recent Improvement	Added family communication requirement through LOTS Donor Family Outreach and Communication Plan (3.2a[1])		Added organ rejection rate to scorecard (AOS)		Through marketing, outreach, and communications programs, created new partnerships with state DMVs and WPFL (2.1b[1])		Added family communication requirement through LOTS Donor Family Outreach and Communication Plan	

Figure 6.1-2B: **Key Support Processes**

PHASE	PRE-DONATION				DONATION		POST-DONATION	
Key Support Process	Laboratory Testing	Donor Chart Review and Release	Supply and Equipment Management	Financial Management	HR Management	IT Management	PI	Quality Compliance Management
Key Requirement	Customer, Partner Satisfaction:	Customer Satisfaction:	Customer, Partner Satisfaction:	Strong Board Ratings:	Workforce Engagement	24/7 Uptime/ Security	Service Quality	100% Compliance
Results	(7.1-2, 7.1-2A, 7.2-1-7.2-2)	(7.2-1-7.2-2)	(7.1-2, 7.1-2A, 7.2-1-7.2-2)	(7.4-6)	(7.3-12)	(7.3-12)	(7.3-12)	(7.3-12)
Key In-Process Measure	Laboratory Requisition Error Rate (AOS)	Donor Chart Error Rate (AOS)	Sterilizer Accuracy (AOS)	Current Ratio of Assets vs. Liabilities (7.5-7)	Connection to Mission (7.3-11)	Server Uptime (AOS)	Energy Efficiency (7.1-27)	Observed vs. Expected by Organ (7.1-20)
Key Outcome Measure	Laboratory Turnaround Time by Work System (7.1-24)	Chart Release Cycle Time (7.1-25)	Radiation Exposure (AOS)	Net Margin (7.5-4)	PEP Ratings (7.3-1)	Security Measures (7.1-29)	PI Help Desk Tickets (7.1-26)	Regulatory and Legal Compliance Key Measures (7.4-4)
How Determined • Regulatory	CAP	CMS, FDA	CAP, FDA, OSHA	CMS, IRS	EEOC, DoL, OSHA	CMS	CMS	All (P.1-5)

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

**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 opportunities for improvement and innovation. The overarching approach to support work process and product improvements is PDSA, with the foundation of III program components. 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 workforce (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 workforce buy-in to ensure improvement in outcomes. For example, one partner hospital referral compliance for 2017 was 68%. The Hospital Services staff worked with the hospital to PDSA several improvements, including training, additional approaches to communication (including daily emails), new workforce orientation, and follow-up with hospital administration. As a result of this focused PDSA, the hospital’s 2018 compliance improved to 85%.

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 consider 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 non-referral-supplier performance (Guardian Ambulance, Transplant Technologies, and Wright Brothers Charters) is monitored, tracked, and trended to ensure they meet LOTS’s operational needs for transporting organs and related activity around the key requirements of accurate information, service quality, and timely communication. These results are included in regular feedback with the key suppliers (*Figures 7.1-27, 7.1-28, 7.1-29, and 7.1-30*). These key suppliers are also vetted based on their abilities to align, communicate, and collaborate with LOTS. To ensure this, LOTS has implemented annual supply-network meetings where donor referral hospitals, medical examiners, and hospices, as well as non-referral key suppliers and partners, gather to review and analyze performance metrics

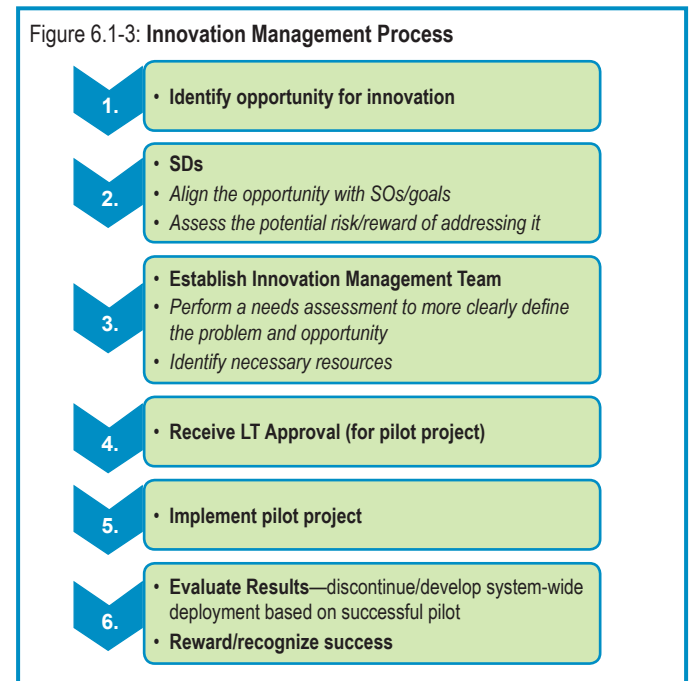
and dashboard reports, discuss procurement and improvement issues, and update customer and regulatory requirements. The resulting annual Supply-Network Improvement Recommendations report contributes to increase two-way communication, strategic alignment, process improvement, and innovation to meet customer requirements and increase the effectiveness of LOTS’s Partnership Model (*Figure P.1-2*) to save lives. 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, a key requirement for LOTS.

A report card was put in place this year for tracking all other suppliers, with information shared with them. Performance thresholds were set in order to take action with nonperforming suppliers. Selection criteria includes five factors: organizational alignment, VMV, fit with LOTS’s core competency, affordability, and impact on customers. The selection process is a systematic review of capabilities against these factors.

### 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. To encourage workforce members to bring innovative ideas forward, LOTS has published guidance in a booklet entitled “What Do You Do with an Idea?” and has recently compiled a collection of success stories entitled “What You Do Matters.”

LOTS’s six-step IMP (*Figure 6.1-3*) provides a practical approach to decisions related to identifying which innovations are worth pursuing. As innovation is brought forward, ideas are matched to LOTS’s SOs and goals to determine if they will address the challenges or opportunities that are prioritized every year during the SPP and LT strategic meetings (2.1a[2]); ideas are subjected to risk analysis and PDSA steps under the OMP (*Figure 6.1-1*). Idea assessment includes the scope of a potential





project, schedule, and needed resources, including financial resources. The final step in the IMP links back to III recognition (Figure 5.2-1).

An evaluation is used to determine which opportunities are intelligent risks worth taking for innovation and corresponding prioritization. After SDs, a multidisciplinary Innovation Management Team may be formed to further consider a new process or implement new ideas/processes. In 2019, LOTS introduced III and has built in reviews of every process every time. This includes an evaluation of every meeting in order to improve the quality of meetings. Results of these reviews can be found in category 7.

Idea assessment includes the scope of a potential project, schedule, and needed resources, including financial resources and potential benefits. These are reviewed at the LT meetings. If approved, an AP is put in place for the project, and financial and other resources are made available.

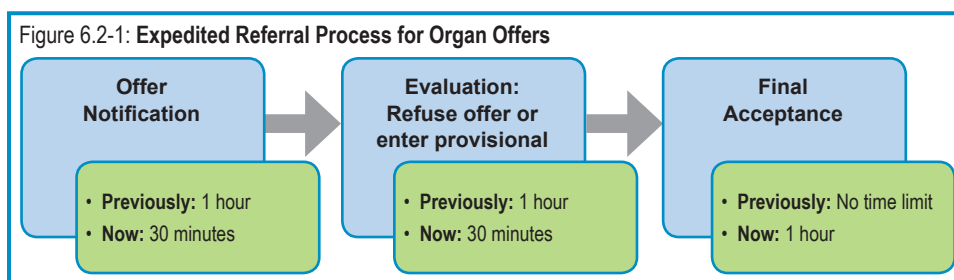
Decisions to discontinue or modify large innovation projects are made by the Innovation and Risk Board; for example, a project or AP may be discontinued or modified with changes to resources if its scope is not being met, cost or schedule is over 10% of the AP, or benefits are not being achieved by less than 90%. There are currently three innovation projects underway with none canceled. Similar innovation teams are used to create breakthrough processes to achieve LOTS's vision of "organs always available."

The SA of financial stability positions the organization to actively pursue innovative ideas and improvements. Financial and other resources are made available through a robust budgeting process and multiple financial analysis tools, including financial projections.

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.

## 6.2 Operational Effectiveness

**6.2a Process Efficiency and Effectiveness** Systematic evaluation to ensure that all aspects of operation effectiveness are built into each process is accomplished



through ongoing use of PDSA, the identification of key opportunities, and the development of new approaches, resulting in learning and cycles of improvement.

Overall costs of operations, cycle time, productivity, and 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 Figures 6.1-2A and 6.1-2B.

Many factors lead to inefficiencies in the Organ Allocation Process. Some of these, such as logistical issues, are difficult to control; others come down to communication. LOTS has recently undertaken a number of efforts to improve communications and reduce the time limits for responding to organ offers, while using DonorNet to electronically notify transplant hospitals about organ offers and to provide donor information. The expedited process that LOTS is pioneering is shown in Figure 6.2-1. The enhanced use of electronic communications effectively addresses delays in the donation process, which can result in the loss of an organ for transplant.

An example of cost control is the development of LOTS's inhouse OR, which incorporated customer feedback and has resulted in process efficiencies and substantial costs savings; the development resulted from a PDSA and the process has been through three cycles of improvement. 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 workforce (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 has led to reductions in on-site deferrals and impacted overall tissue donor numbers.

Originating from the annual SPP session and its evaluation, a well-defined audit calendar, developed in 2014, 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. At every LT meeting at which audit findings are discussed, the LT recommends an improvement to a process under discussion. LT members are also evaluated by their subsequent contribution to improvements discussed at these 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 the 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 opportunities for process improvement and innovation 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

LOTS uses an Information Protection Program (IPP) to protect the security and cybersecurity of sensitive and privileged data and information about its customers, partners, collaborators, stakeholders, and suppliers. LOTS manages electronic and physical data and information to ensure confidentiality and appropriate access through protected applications and secured access based on the role in the organization at time of hire or role change. LOTS has a Technology Refresh Process to provide replacement based on hardware lifecycles, technology changes, etc.; this ensures that leading-edge technology and security are in place.

Software technology changes and review of current needs occur at least annually in the Information Management Plan, which includes input from the Information Technology Leadership Council, senior leaders, and medical staff leadership. The IPP consists of four leadership areas: (1) information security, (2) privacy, (3) information lifecycle management, and (4) physical security. Identification and prioritization of information technology systems to secure from cybersecurity threats are based on program audit assessments and BOD discussions. They include the requirements to (1) prevent harm to donors and donor families, (2) prevent a "mega breach," (3) prevent disruption of operations, and (4) drive compliance.

LOTS maintains its awareness of emerging security and cybersecurity threats through a dedicated cybersecurity team with access to industry knowledge and expertise as a guiding source. The team's strategy aligns with the NIST CSF to protect systems from cybersecurity attacks, including methods to detect, respond, and recover from cybersecurity attacks. In alignment with the NIST CSF, LOTS uses the Baldrige Cybersecurity Excellence Builder to evaluate and assess its cybersecurity processes. LOTS has adopted the seven-step Cybersecurity Process from the NIST CSF. These steps are repeated to continuously improve cybersecurity.

The IS used includes software, data, network infrastructure, computer hardware, and key assets. An overview of IS and a systematic PDSA review of the process for data and information security and cybersecurity are components of the annual SPP to ensure cycles of continuous improvement and learning; evaluation, and improvement 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, and they are stored in a secure location with access granted only to approved staff. 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.

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 (*Figure 7.1-30*). 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 all sensitive or privileged data and information, particularly of the sensitive and privileged type. 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. Those allowed access are required to receive training in security and confidentiality policies annually. The organization's password policy outlines the appropriate parameters for selecting and securing system- and user-level passwords. Forced password changes occur every 90 days to ensure security and integrity. Workforce members with EMR access are required to sign confidentiality agreements, and IT audits performed by QS verify appropriate access and current users. There is also a generation and destruction schedule for backup paper documents. These are kept in secure combination-lock file cabinets with access granted to staff with required access to the documents

In 2019, LOTS hired a cybersecurity contracting agency that follows the NIST CSF. This firm "BOT BUSTERS" was used by prior Baldrige Award winners and so was selected by LOTS because of its desire to benchmark against Baldrige winners. LOTS is going through an assessment phase and will have results to report in early 2020.

LOTS's cybersecurity strategy includes a layered approach that includes encryption and authentication. LOTS has a mail encryption policy, which requires encryption of all emails that

contain personally identifiable information (PII) or personal health information (PHI). Through LOTS's policy and the LDS, all users with access to PII and PHI are informed and trained on how to understand and fulfill their security and cybersecurity roles and responsibilities, followed by learning effectiveness testing every month.

Monthly vulnerability testing on all devices helps to identify and prioritize technology system protection from internal and external risks. IT locations include badge entry for authorized personnel only. Continual education in cybersecurity is provided through ongoing phishing exercises that train end-users on how to detect suspicious items (see [Figure 7.1-39](#)). Improvements have resulted in automated patch deployments, encryption of information, investment in data-loss-prevention software, and regularly updating of antispyware on all computers.

As a result of feedback from its 2019 Baldrige report, LOTS has taken steps to ensure that customers and key stakeholders understand and fulfill their security and cybersecurity roles and responsibilities. Suppliers are required by contract to implement appropriate measures designed to meet the objectives in the new Cyber Supply-Network Risk Management Plan. Suppliers are monitored to confirm that they have satisfied their obligations, as required. Response and recovery planning and testing are conducted with suppliers/providers. In addition, customers and partners are provided cybersecurity awareness education and are adequately trained to perform their IS-related duties and responsibilities, consistent with related policies, procedures, and agreements

### **6.2c Safety and Emergency Preparedness**

**6.2c(1)** In 2014, based on the PDSA of emergency preparedness, LOTS established a new Safety Program, managed by the Safety officer, that utilizes systematic processes, including the LDS and PDSA 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 7.3-9](#)). In addition, the 2019 workforce satisfaction survey noted an increase in overall satisfaction with safety to 4.25 out of 4.5 ([Figure 7.3-8](#)).

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 workforce members being provided the hepatitis B vaccine. In addition, workforce safety concerns are identified in ODs, department meetings, RFO, workforce surveys, focus groups, 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 includes monthly safety programs encompassing personal safety, CPR, automated external

defibrillators, 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.

LOTS's safety programs and accident reporting approach are fully deployed to all workforce members and sites, including personnel stationed at, visiting, or in transit to hospitals and other remote sites. Results from biannual surveys of operating-environment safety and of safety and security perception among the workforce at headquarters and each remote site provide actionable information for the LT and work system leaders to identify safety issues, conduct root-cause analysis, apply PDSA, and formulate required APs for remedial action. 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 workforce 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 workforce members.

LOTS's leased aircraft meets FAA's general aviation aircraft certification standards, and pilots and crew are well trained in safety and emergency preparedness. All passengers are briefed using the AOPA Air Safety Institute's Passenger Briefing Checklist, which covers emergency procedures.

**6.2c(2)** LOTS has a well-documented, executable disaster preparedness plan that is evaluated and improved each year and 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). The plan prepares the workforce to respond to operational disruptions in the event of an emergency. The plan has been updated as a result of testing and analysis, and expanded to address additional scenarios, such as an active-shooter scenario. 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 workforce needs, LOTS has reciprocal agreements with other OPOs to provide support 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. Led by all OWS and TWS leaders, the ERP and related safety and emergency preparedness work processes undergo review for improvement and learning using the PDSA methodology every year during the SPP.

## Category 7: Results

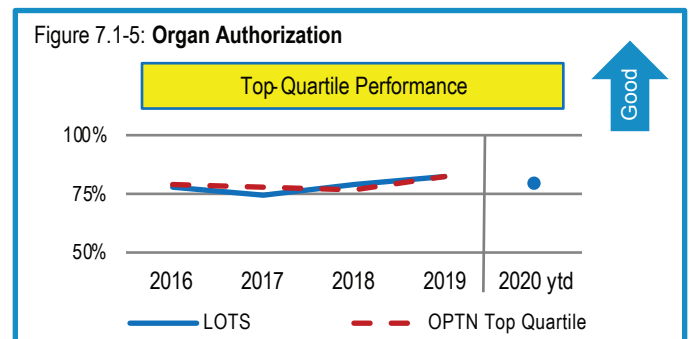
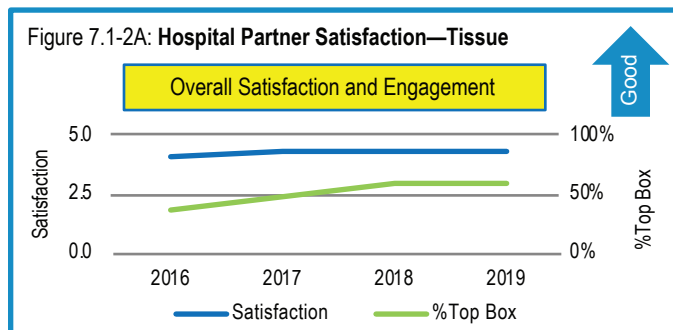
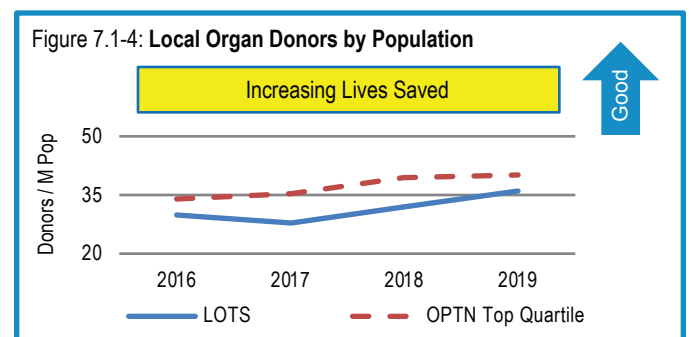
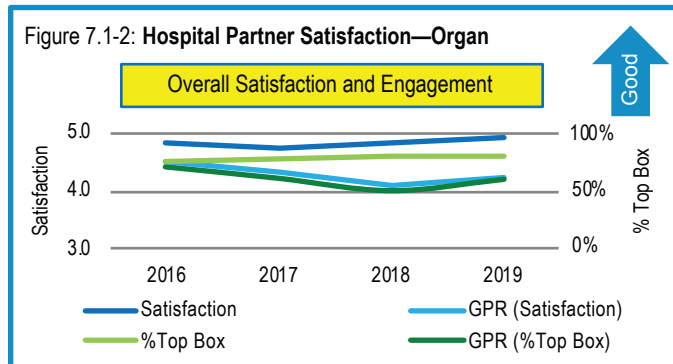
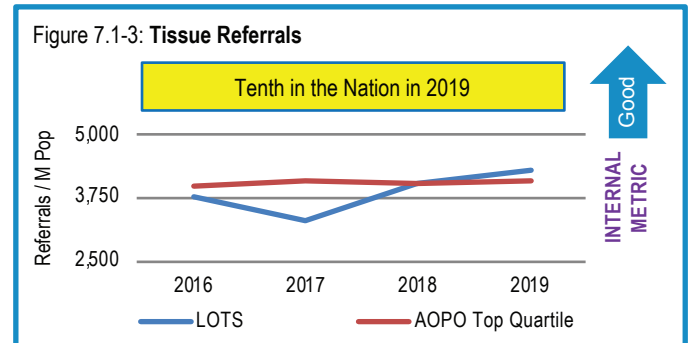
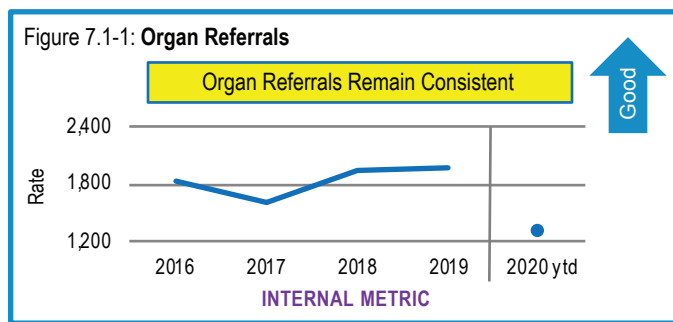
### 7.1 Product and Process Results

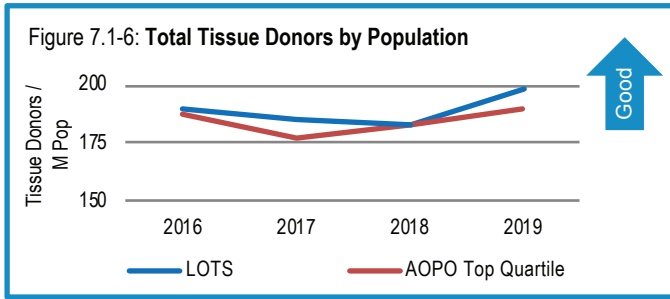
#### 7.1a Customer-Focused Product and Service Results

LOTS has four key work processes within the work systems: Referral Management, Authorization, Procurement/Allocation, and Post-Donation (Figure 6.1-2). (Results for Post-Donation are AOS.) Referral Management, the first key process in both work systems, is measured by organ and tissue referrals. Organ referrals (Figure 7.1-1) experienced organizational best levels in 2019. Referral is the start of collaboration; hospital satisfaction with the donation is reflected in Figures 7.1-2 and 7.1-2A.

(GPR is a national organization providing comparative satisfaction and engagement data.) Tissue referrals have increased, allowing LOTS to achieve “tenth in the nation” status in 2019 (Figure 7.1-3); LOTS is one of 58 OPOs in the United States.

The key outcome measurement for authorization in the OWS is organ donors (Figure 7.1-4) and organ authorization (Figure 7.1-5), and the authorization outcome measure in the TWS is tissue donors by population (Figure 7.1-6). Organ donor numbers remain high. Tissue donor numbers have

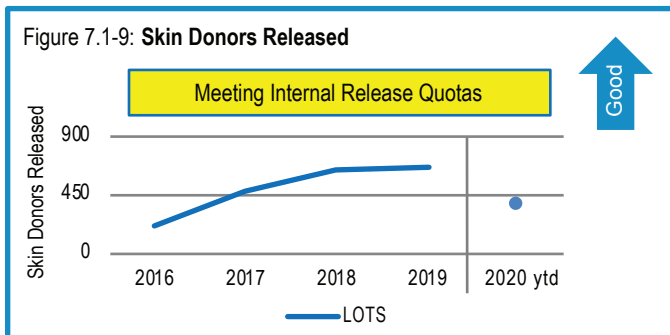
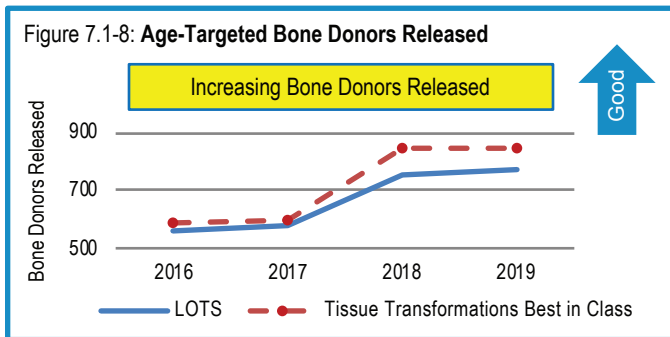
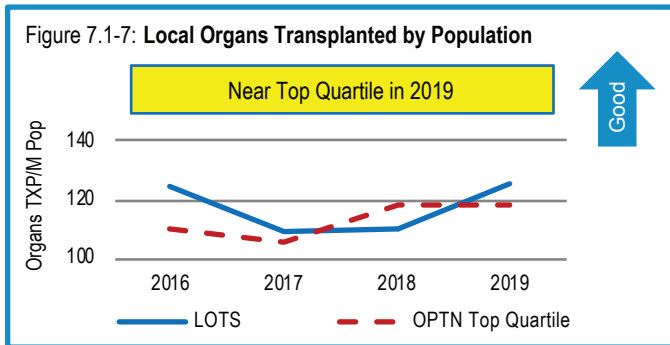




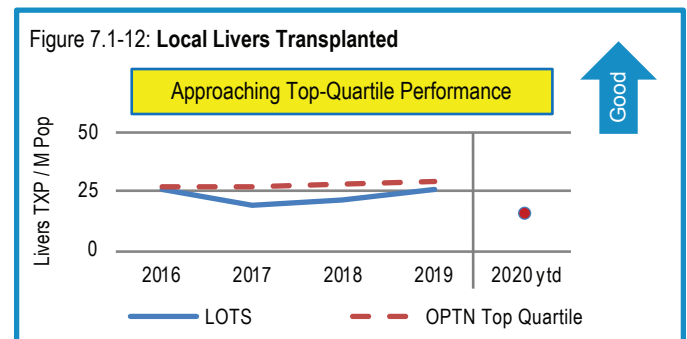
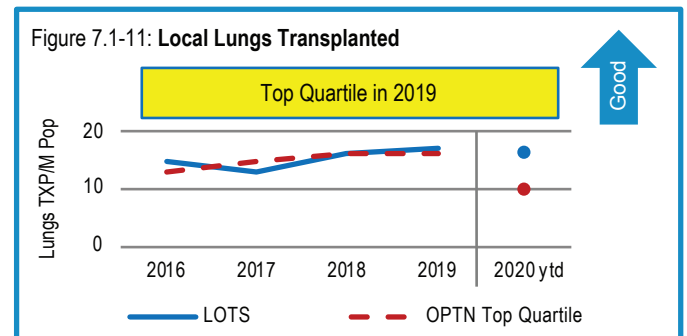
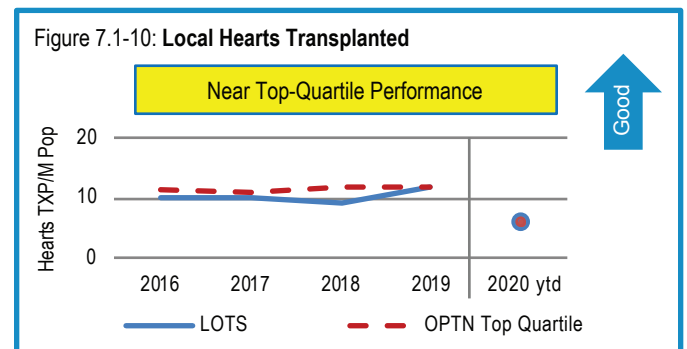
remained steady over the last three years, meeting the industry comparative.

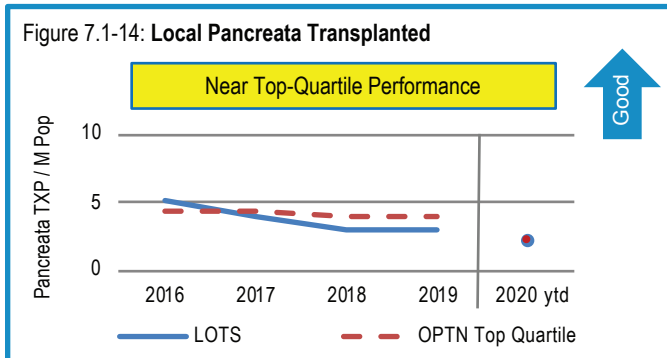
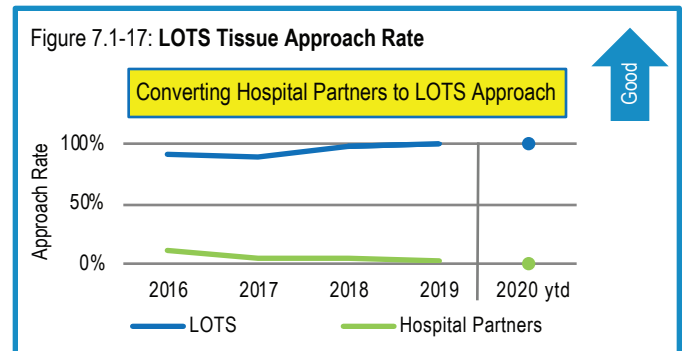
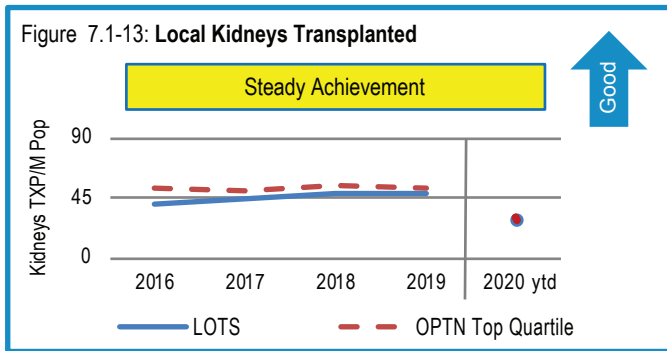
Procurement is measured by local organs transplanted in the OWS (Figure 7.1-7). Local organs transplanted are a topline measure directly responsible for increasing lives saved. Local organs transplanted positions LOTS at the national top quartile. In the TWS, the measures are Age-Targeted Bone Donors Released (Figure 7.1-8) and Skin Donors Released (Figure 7.1-9). An AP has been established for age-targeted bone donors; skin donors released, a more recently added metric, exceeds the internal target for 2019 and shows a beneficial trend.

The two work systems include two service lines that are segmented into two customer groups: local organ transplant centers



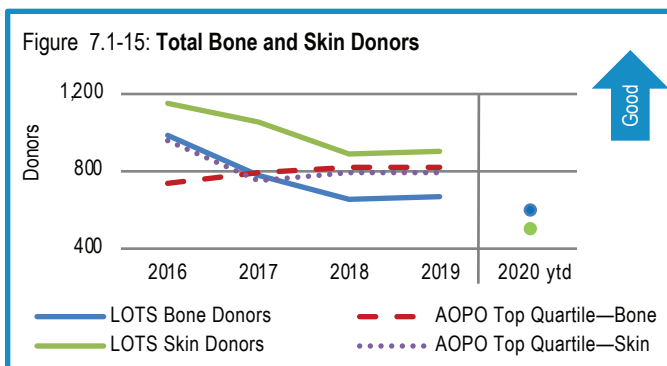
and tissue processors/eye bank (Figure P.1-6). The organs transplanted can be segmented by organ type: heart, lung, liver, kidney, and pancreas, and results are shown by organs transplanted per million (Figures 7.1-10, 7.1-11, 7.1-12, 7.1-13, and 7.1-14). In 2018, there was an increase in Hepatitis C+ 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 2019. Livers transplanted per million remains steady, nearing the top quartile. Kidneys transplanted per million remains steady, with steady improvement since 2017. Pancreata transplanted per million remains near top-quartile performance. Tissue donors can be segmented by bone donors and skin donors (Figure 7.1-15). (Eye donor data are AOS.) Bone and skin donor numbers have been impacted by the opioid epidemic, resulting in decreased suitability, and processor limits have also resulted in decreases.





LOTS performed the approach for tissue authorization at 100% of the hospitals, an increase of nearly 10% in the last four years.

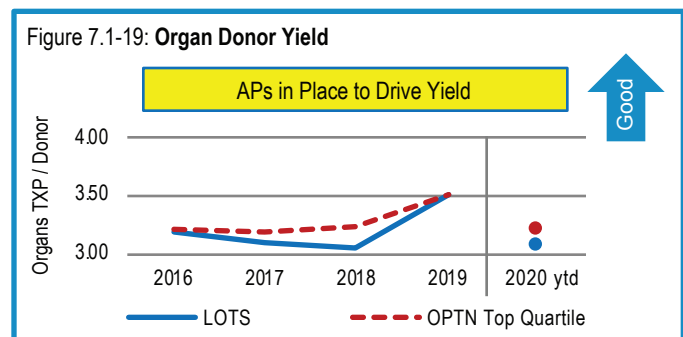
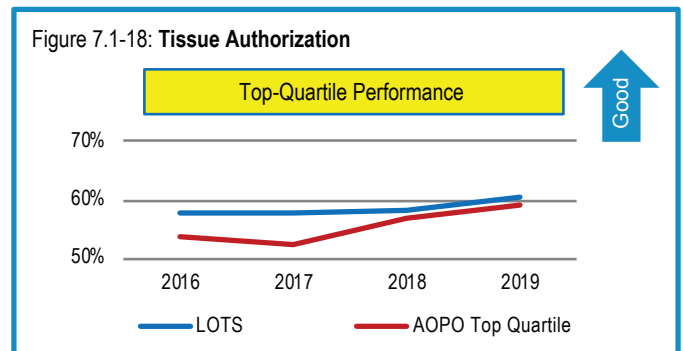
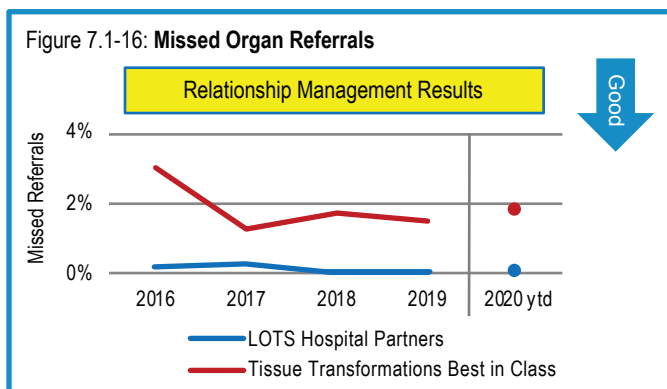
The authorization in-process measure for OWS is the organ authorization rate (*Figure 7.1-5*), which shows steady performance. The TWS in-process authorization measure is the tissue authorization rate (*Figure 7.1-18*). Breakthrough process changes implemented, combined with new job requirements, hiring practices, and workforce development and training, have resulted in tissue authorization outcomes exceeding the industry top quartile.

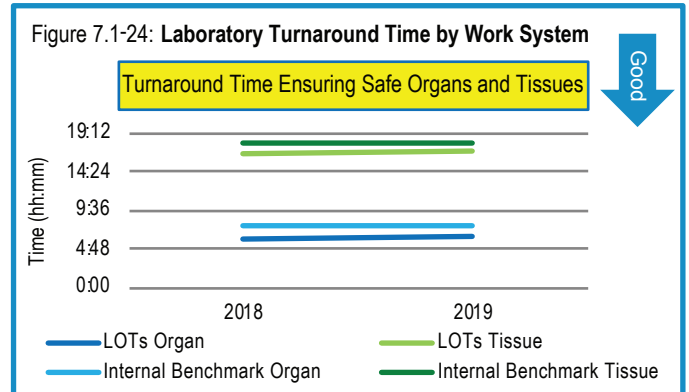
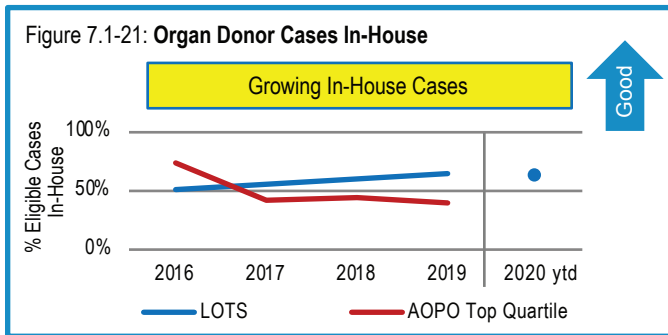
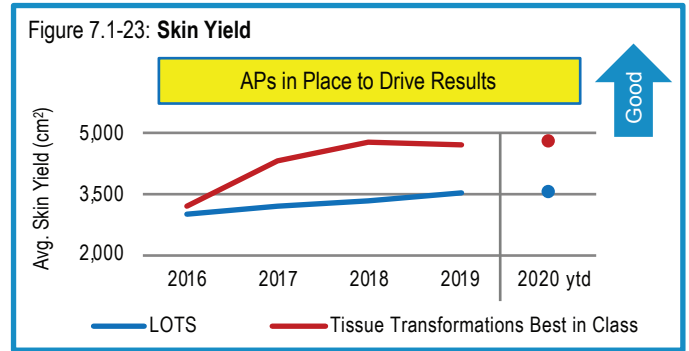
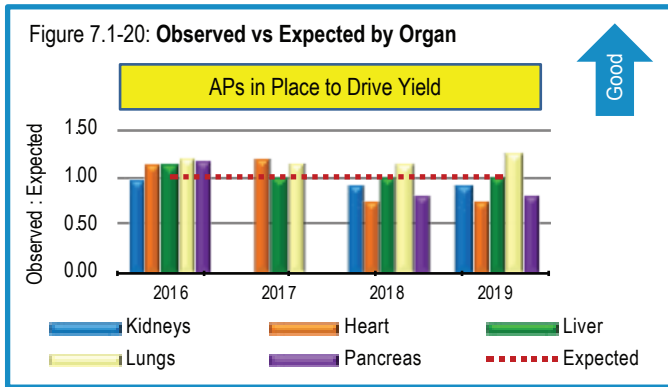


The in-process measures for procurement are listed in *Figure 6.1-2A*. Optimizing the gift (yield; *Figure 7.1-19*) is demonstrated in the OWS by the ability of the clinical staff to manage the donor's clinical status to ensure the highest number of transplantable organs. Yield was impacted in 2018 by 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 national results with lungs (*Figure 7.1-20*). Donor management protocol compliance 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

## 7.1b Work Process Effectiveness Results

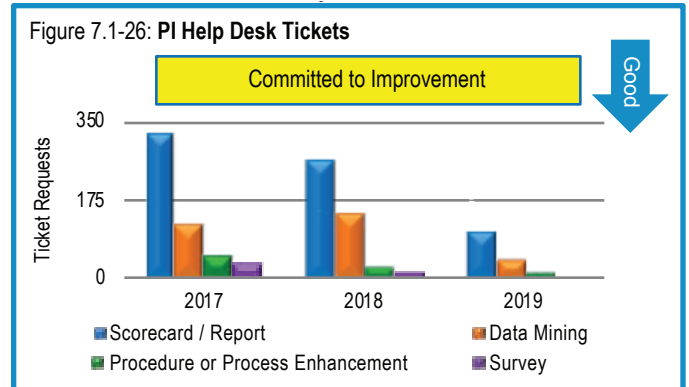
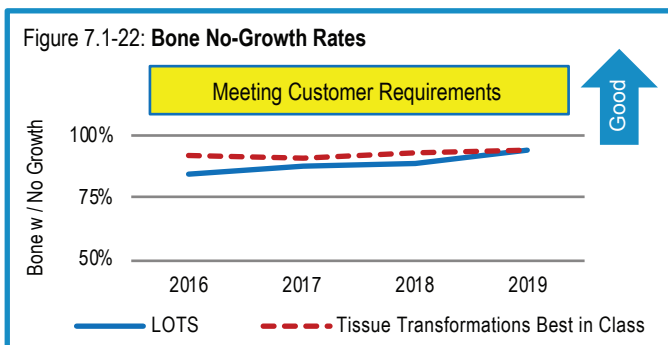
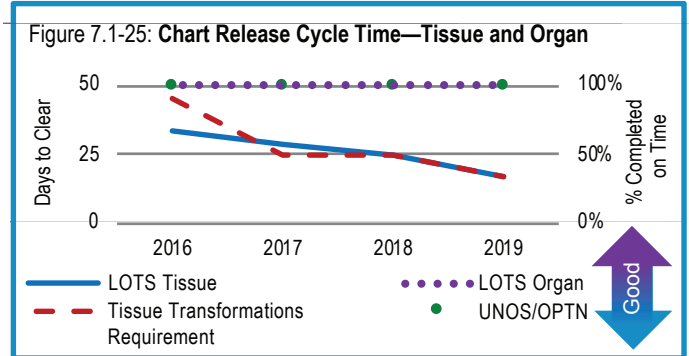
**7.1b(1)** LOTS's key in-process measures are noted in *Figures 6.1-2A* and *6.1-2B*. The relationship management efficiency and effectiveness results for OWS are missed organ referrals (*Figure 7.1-16*). Missed referrals have remained at or under 2% since 2016. For TWS, the relationship management in-process measure is the percentage of approaches by LOTS (*Figure 7.1-17*). Hospital Services staff have worked closely with hospital partners to transition the Tissue Authorization Process to the LOTS Communication Center department. In 2019,





for the donor hospitals, transplant centers, and eye bank. The TWS procurement in-process measures include bone no-growth and skin yield. LOTS met the Tissue Transformations partner benchmark for Bone No-Growth Rates (*Figure 7.1-22*). Skin Yield (*Figure 7.1-23*) shows favorable trends.

Laboratory testing turnaround time (*Figure 7.1-24*) has seen steady performance. Chart Release Cycle Time—Organ and Tissue (*Figure 7.1-25*) has seen 100% performance in the number of days needed for organ charts to be reviewed and uploaded to meet regulatory requirements. Chart Release Cycle Time—Tissue 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 Tissue Transformations partner requirement. Sterilizer accuracy is the documentation compliance that impacts clinical equipment availability, which has been at 100% since 2016. Similarly, to support business operations, server uptime has been at 100% since 2016. As seen in *Figure 7.1-26*, process improvement is consistent.



**Figure 7.1-27: Environmental Concerns**

	FY 2017	2018	2019	Goal
Recycling % of Waste	75%	79%	85%	>90%
Energy Efficiency	72%	75%	82%	>90%

**7.1b(2) Workplace Preparedness** (*Figure 7.1-28*) demonstrates multiple efforts deployed to ensure the safety of the workforce. Emergency preparedness actions are taken to minimize

interruptions in the delivery of LOTS's services. **Figures 7.1-29** through **7.1-32** show security measures, safe workplace training, safety drills, and safety measures.

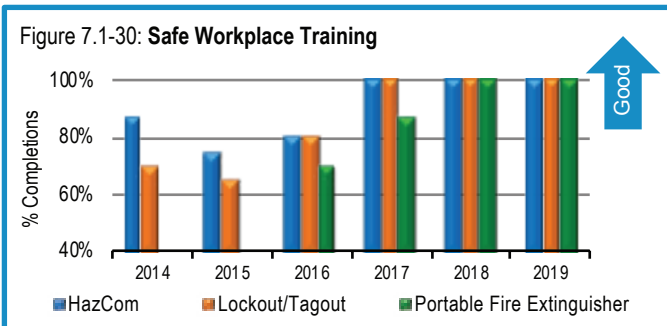
**Figure 7.1-28: Workplace Preparedness**

Preparations	Goal	2016	2017	2018	2019	2020 YTD
Safety Training	All Employees	100%	100%	100%	100%	100%
Fire Alarm Testing	Quarterly	4	4	4	5	3
Aero Charter Safety Training	All Applicable Employees	100%	100%	100%	100%	100%
Generators and System Availability Testing	Weekly	100%	100%	100%	100%	100%
Injury Investigation	All Injuries	100%	100%	100%	100%	100%
Data/VOIP (Communication) Testing	Real Time	100%	100%	100%	100%	100%

**Figure 7.1-29: 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



**Figure 7.1-31: Safety Drills**

	2016	2017	2018	2019
Safety Drills Held	3	4	4	4
Met Population and Time Requirement	2	3	4	4

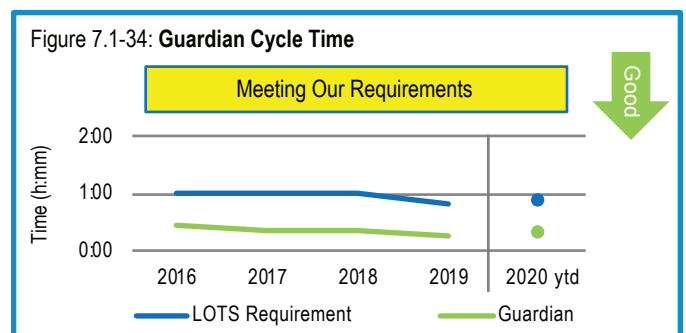
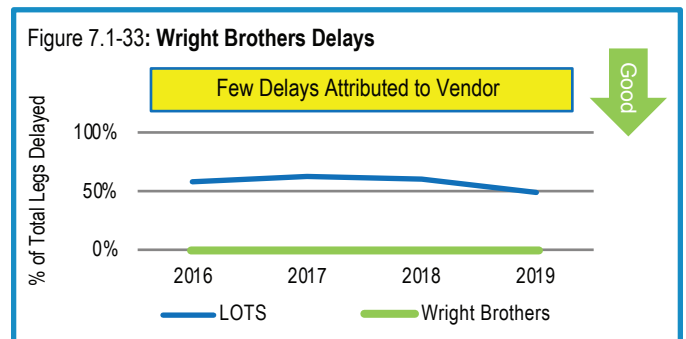
**Figure 7.1-32: Safety Measures**

	2016	2017	2018	2019
OHSA Violations	0	0	0	0
State and Local Safety Citations	0	0	0	0
Worker Comp Claims	2	0	0	0

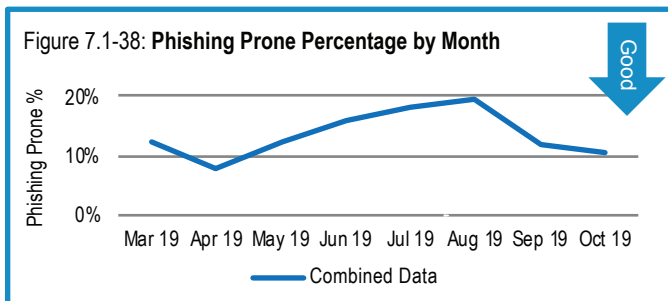
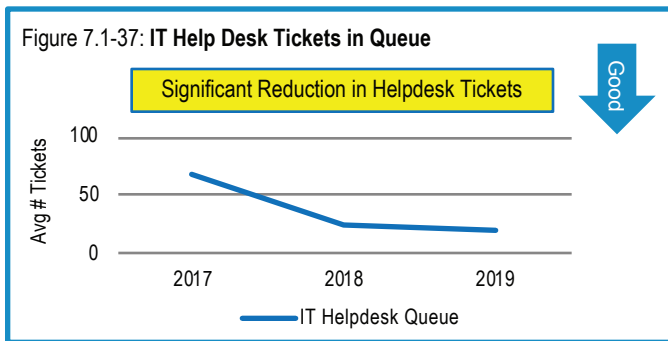
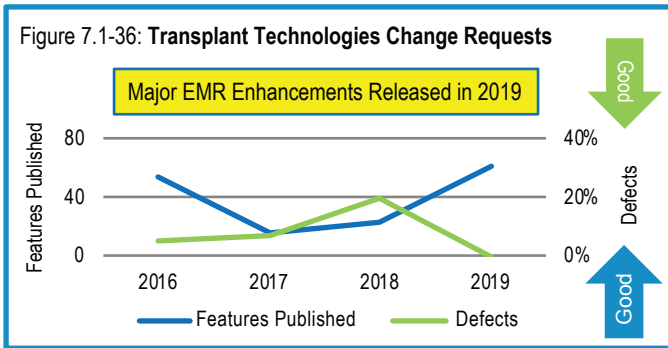
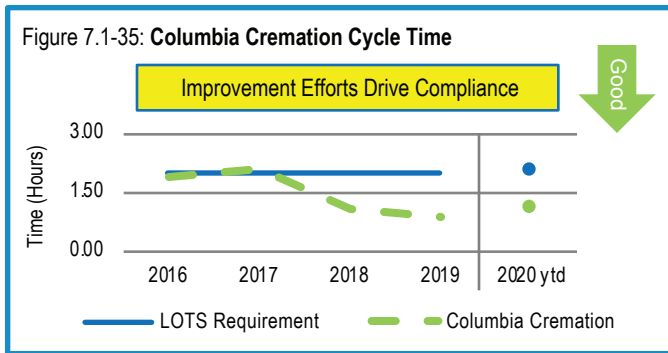
**7.1c Supply-Network Management Results**

Supply optimization via an electronic inventory system has resulted in 98% availability for supplies for all in-house cases. Wright Brothers provides 24/7 access to aircraft with a 90-minute launch requirement, and as demonstrated in **Figure 7.1-33**, delays due to provider issues occurred in less than 5% of the 260-plus launches annually. Guardian Ambulance exceeds requirements 100% of the time (**Figure 7.1-34**). Columbia Cremation, a key collaborator in serving as a referral for organ donors and coordinating activities to match a donor's wishes, has seen improvements since 2016, exceeding delivery time requirements in 2019 (**Figure 7.1-35**). Transplant Technologies, a key supplier, has seen increasing numbers of major releases with complex features in 2018 that exposed more opportunities for defects (**Figure 7.1-36**). TT has managed to reduce the number of open IT Help Desk Tickets in Queue (**Figure 7.1-37**). LOTS also tracks the satisfaction of key suppliers (**Figure P.1-6**) on how they fulfill LOTS's expectations of accurate information, service quality, and timely communication.

In regards to cybersecurity, LOTS performs monthly vulnerability testing on all devices and continual education through ongoing phishing exercises that train end-users on how to detect suspicious items. Phishing Prone Percentage by Month (**Figure 7.1-38**) is an example of data tracked.







## 7.2 Customer Results

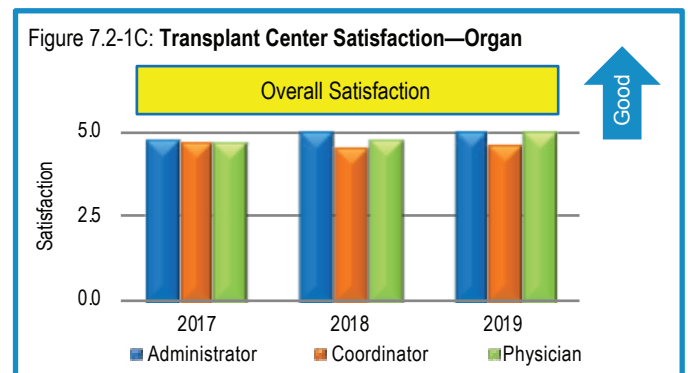
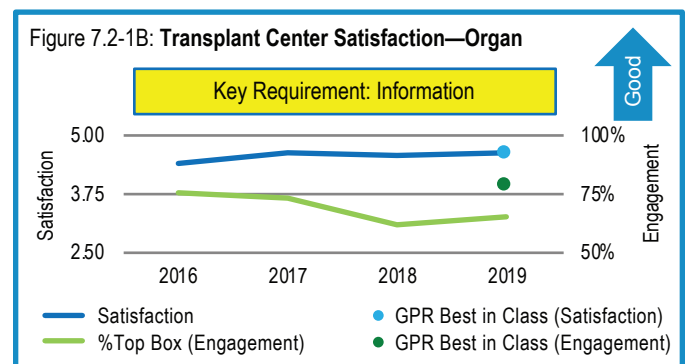
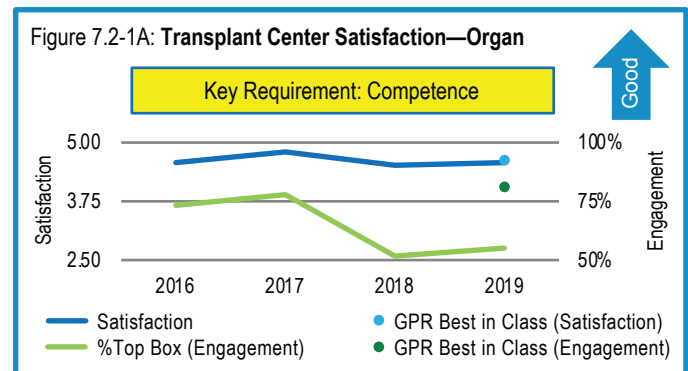
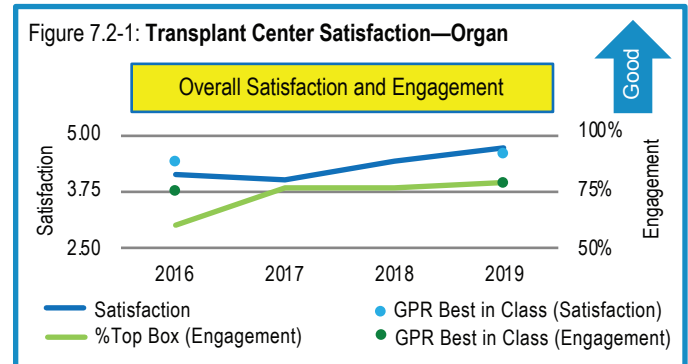
### 7.2a Customer-Focused Results

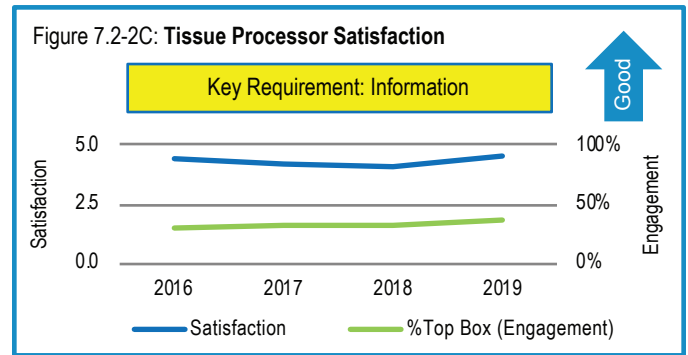
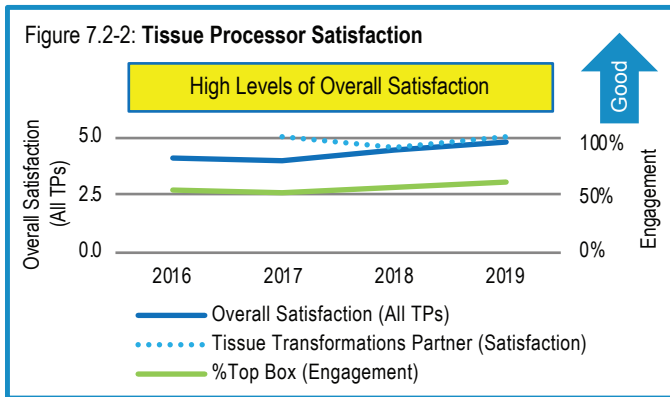
**7.2a(1)** Customer satisfaction data are gathered through the VOC methods as listed in *Figure 3.1-1*, including the Customer Survey Process, which has undergone multiple cycles of learning and strategic improvement.

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 four 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

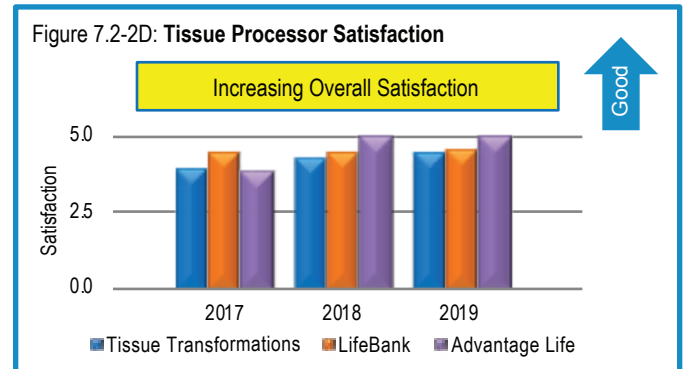
meeting the third requirement, “maximize donation,” is not measured through surveys. Instead, operational results are utilized to gauge effectiveness in achieving this key customer requirement and SO (*Figure 7.1-7*). Organ transplant center satisfaction (*Figure 7.2-1C*) shows strong results for 2019 for all three segments.

Satisfaction levels among LOTS’s tissue processors (*Figure 7.2-2*) are critical to ensuring organizational success. Customer satisfaction meeting the first key requirement

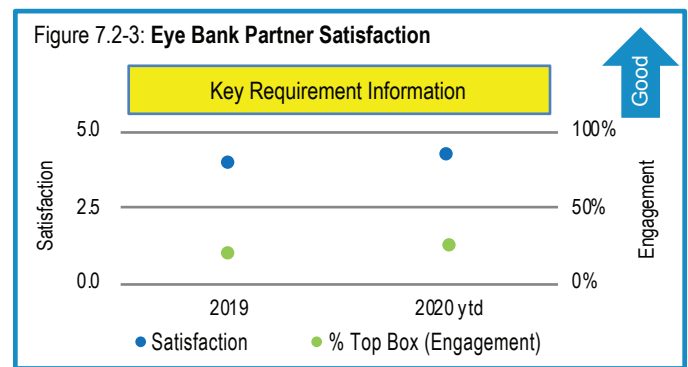




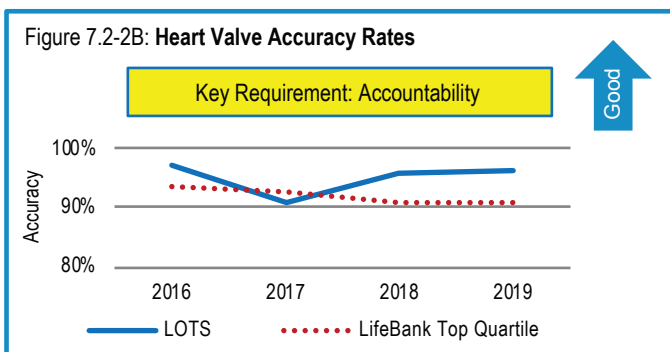
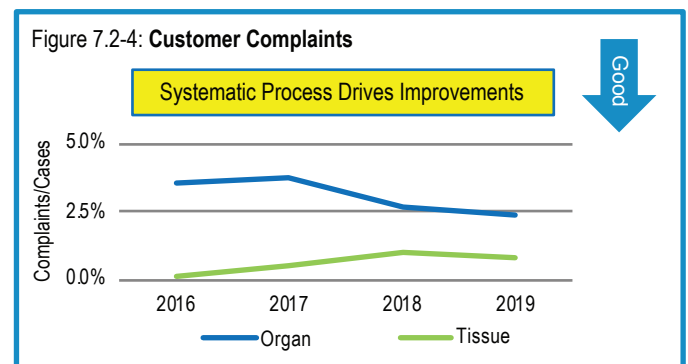
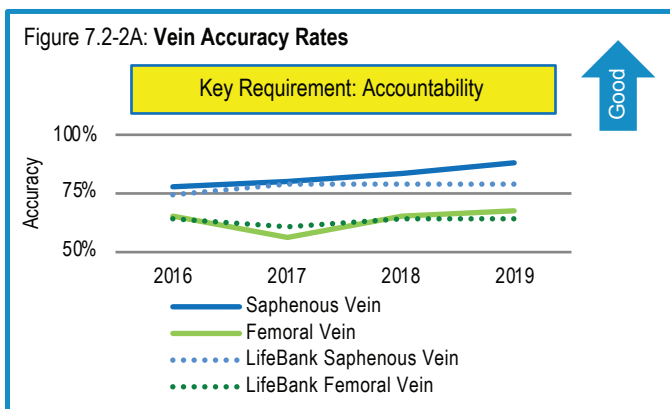
“accountability,” defined as error rate minimization, is measured utilizing operational metrics reported via tissue processor scorecards (*Figures 7.2-2A and 7.2-2B*). When segmented by the key customer requirement of “information” (*Figure 7.2-2C*), results are consistently high. The third processor requirement is “maximize donation,” which is tied to LOTS’s tissue donation rates (*Figure 7.1-6*). Tissue processor satisfaction can be segmented by individual processor (*Figure 7.2-2D*). Satisfaction by processor has remained strong.



LOTS also has recently begun partnering with an eye bank, VisionMax, to ensure eye donation opportunities for families in the DSA (*Figure 7.2-3*).

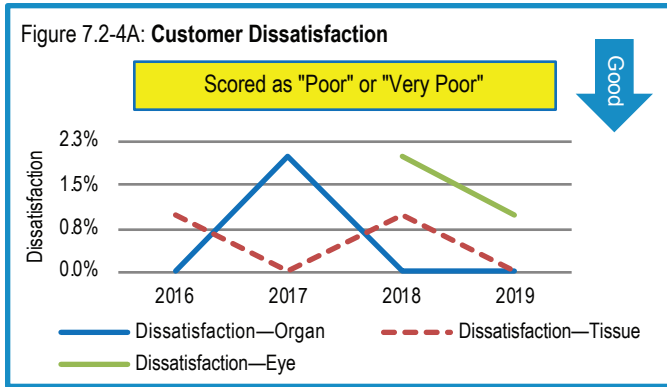


To determine dissatisfaction levels with local organ transplant centers, tissue processors, and the eye bank, LOTS analyzes data obtained through the Customer Complaint Process (*Figure 3.2-2*). Despite an increase in the number of organ and tissue donors, the percentage of customer complaints for the two customer groups has demonstrated favorable trends (*Figure 7.2-4*). 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.

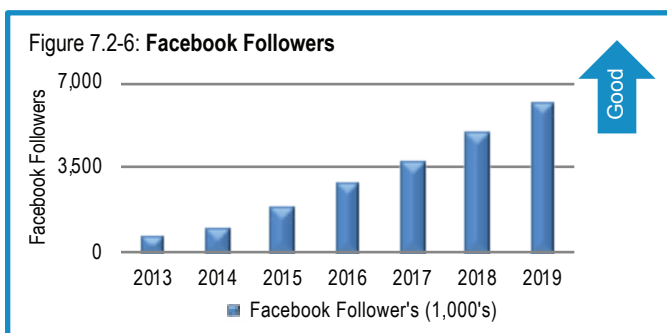
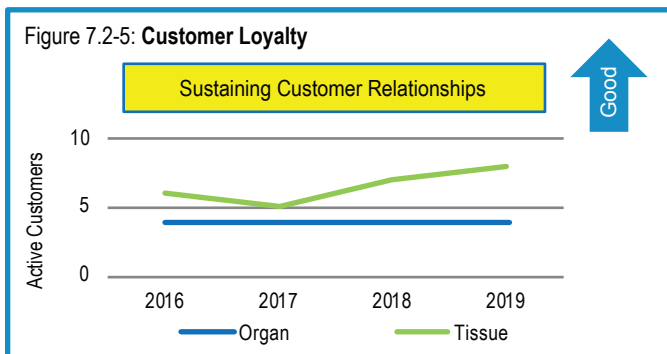
In addition to complaints, LOTS utilizes customer survey data to measure dissatisfaction by determining the percentage of poor and very poor responses (scores of 1 or 2) on customer surveys. Results for organ, tissue, and eye are at or near 0%, with organ and tissue maintaining low trends since 2016 (*Figure 7.2-4A*).



**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. 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 7.2-5*). 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. LOTS tracks customers as they move through the cycles of relationship/stages.

Social media are used for campaigns and messaging to increase the number of registered donors within the DSA. In addition, social media are used to communicate and highlight donor family and recipient stories via Facebook, Instagram, and Twitter, reinforcing the mission. *Figures 7.2-6* and *7.2-7* highlight LOTS’s increasing Facebook followers and social media engagements.



**Figure 7.2-7: Social Media Engagements**

Social Media Engagements 2019	
YouTube Views	33,000
Instagram Followers	750
Facebook Followers	6,200
Twitter Followers	300

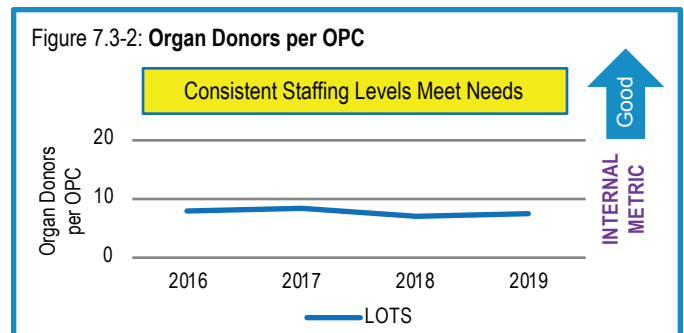
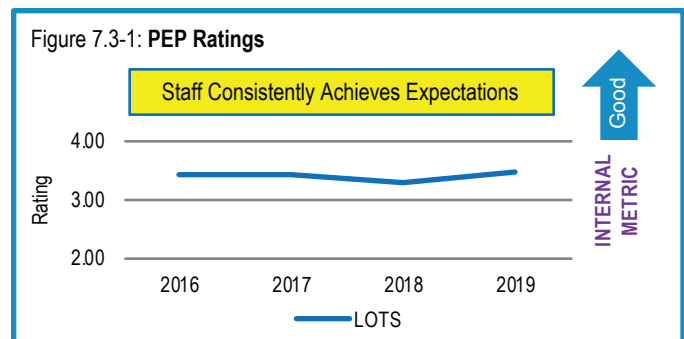
### 7.3 Workforce Results

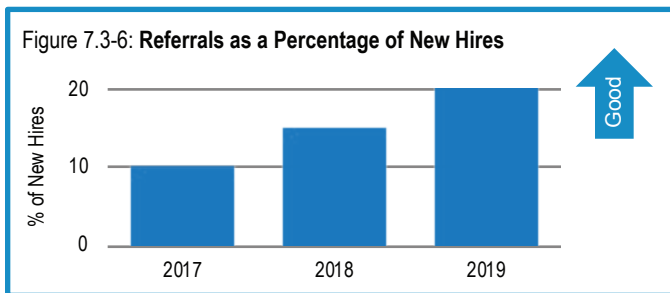
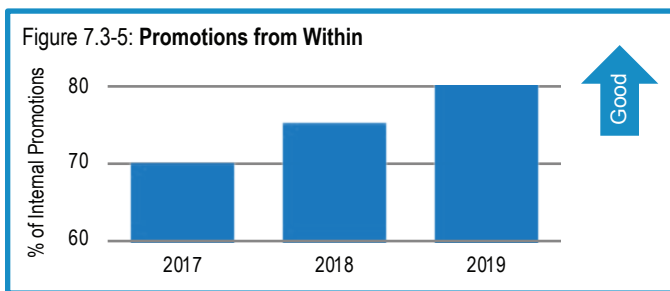
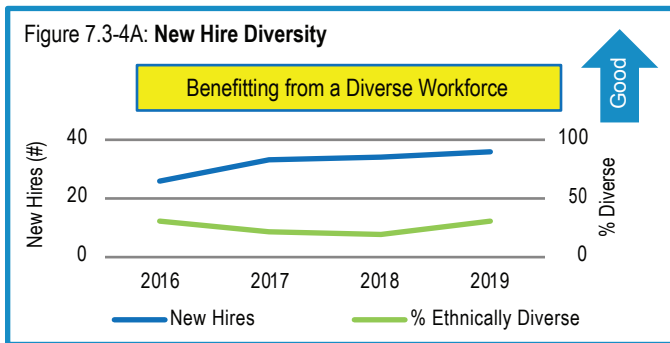
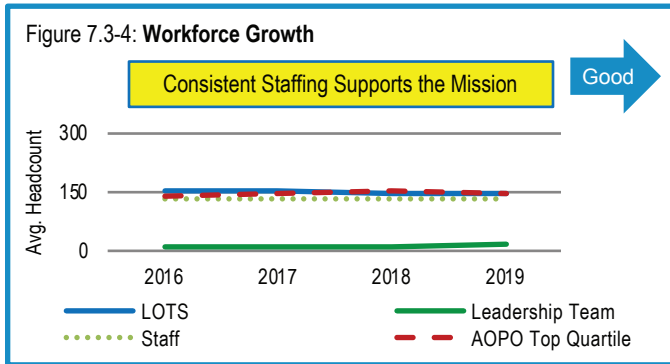
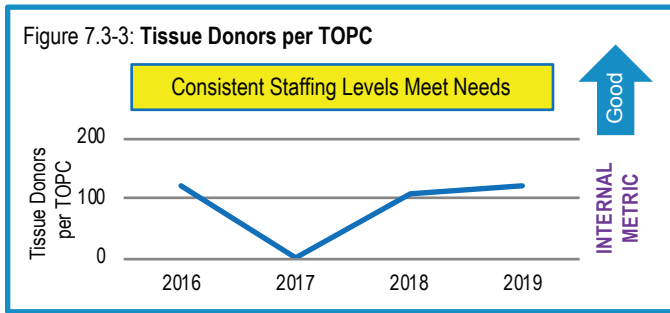
#### 7.3a Workforce-Focused Results

**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 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 four years as services have expanded. *Figure 7.3-5* shows the percentage of promotions from within the organization; promoting within is part of an AP for the SO Maximize Stakeholder Relationships (*Figure 2.1-3*). *Figure 7.3-6* shows referrals as a percentage of new hires.

Where possible, workforce is segmented by job type (*Figure P.1-4*); additional segmentation by gender, tenure, department, and ethnicity AOS.





**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

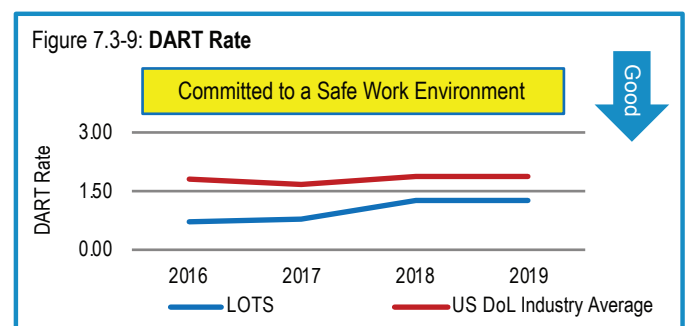
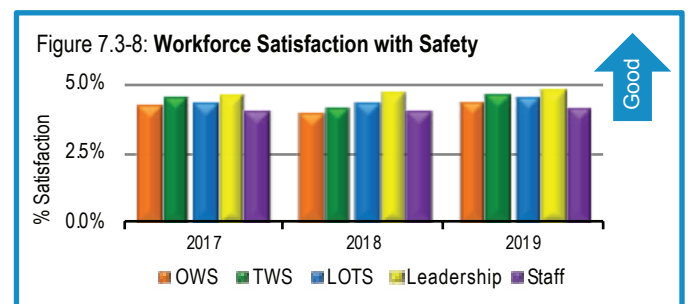
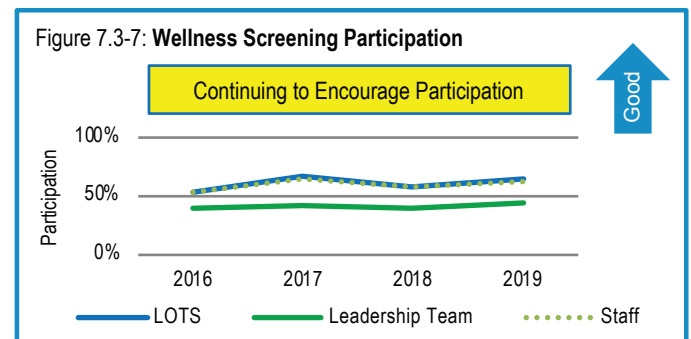
security, as well as employer-provided services and benefits, are monitored continuously to ensure effectiveness.

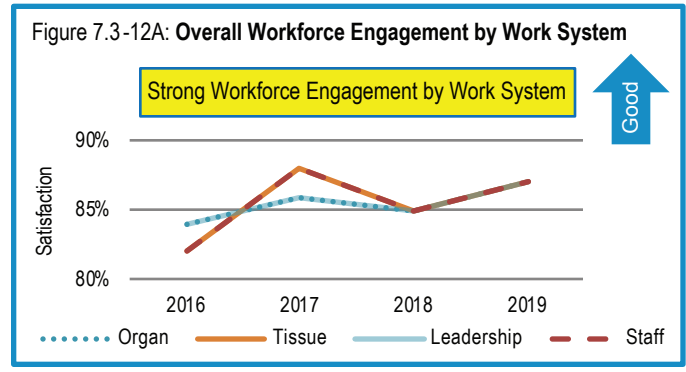
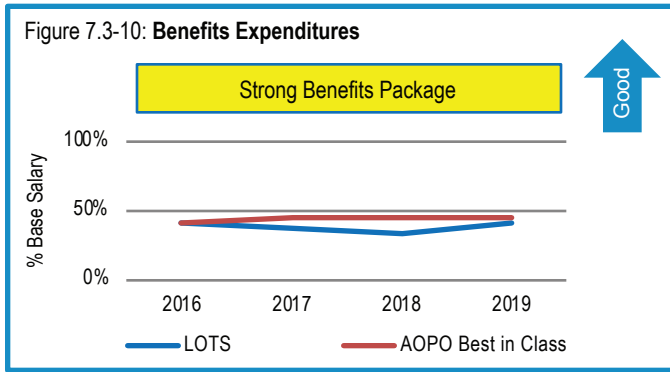
In an effort to exhibit concern and care for employees, as well as engage employees in the topic of personal health, a wellness program was initiated in 2009. The wellness program participation remains strong (*Figure 7.3-7*). *Figure 7.3-8* shows overall perception of safety by work system and by LOTS as a whole, with 0 being least satisfied and 5 most satisfied.

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 7.3-9*).

Radiation exposure rates are used to assess the amount of radiation organ clinical staff members are exposed to when utilizing imaging equipment; LOTS has been at 0% for several years.

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*).

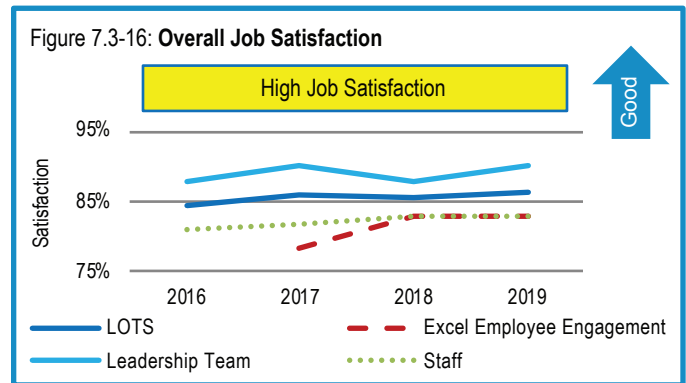
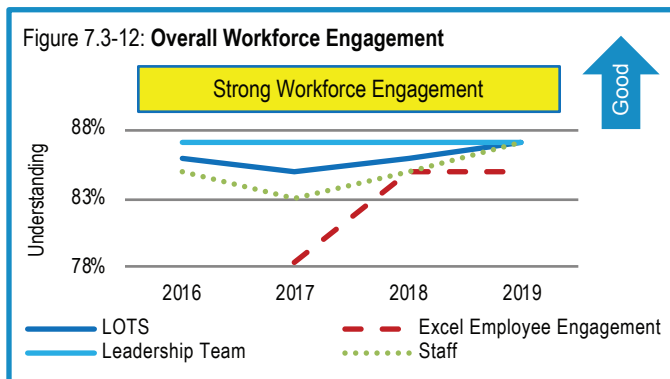
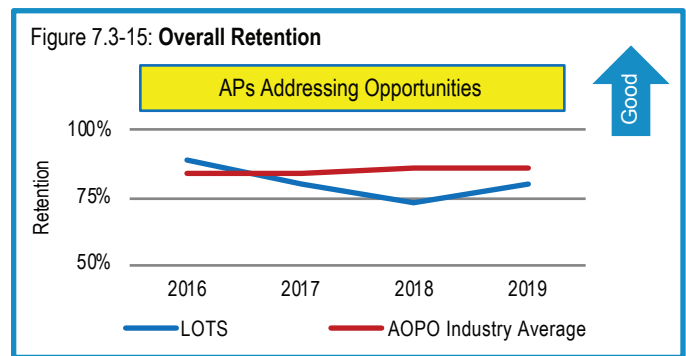
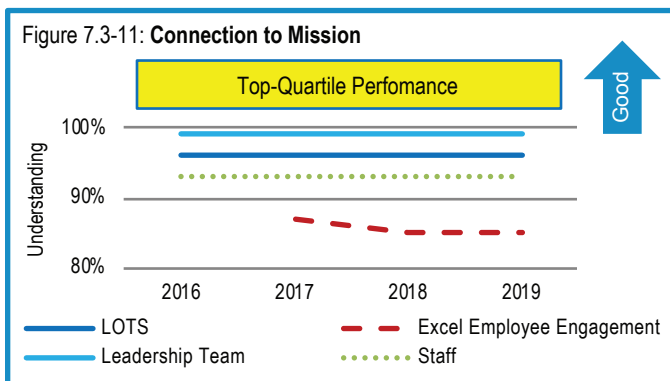
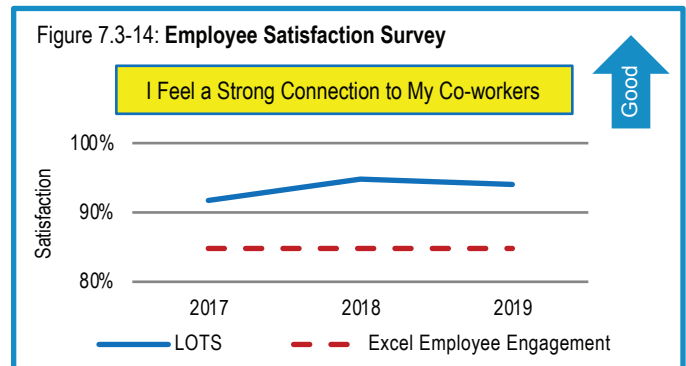
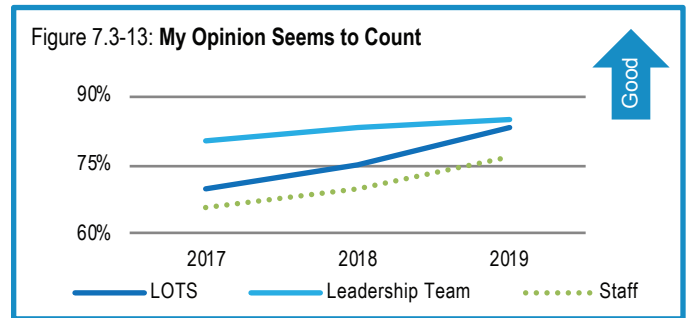


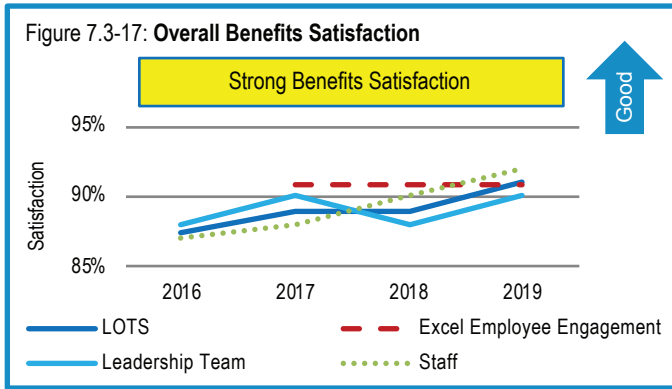


**7.3a(3)** Essential to the workforce climate, and a key contributor to employee engagement, is the connection to the organization’s mission. On workforce surveys, staff members repeatedly indicate an exceptional level of understanding of how their individual positions contribute to the mission, exceeding health care median performance (*Figure 7.3-11*).

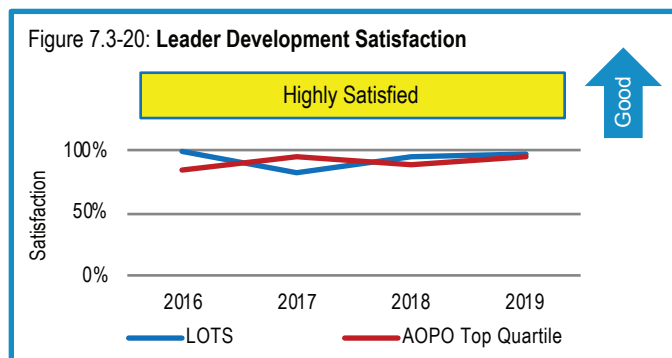
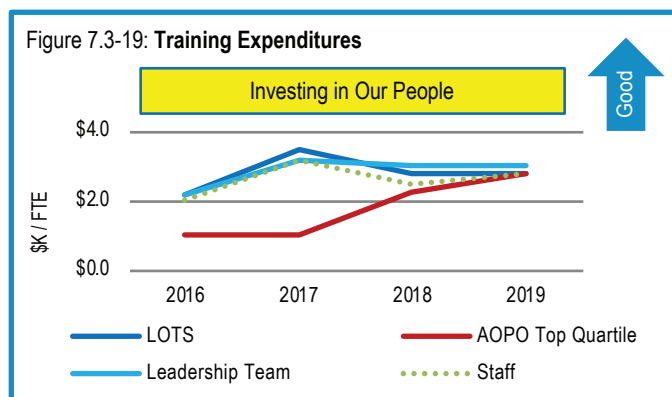
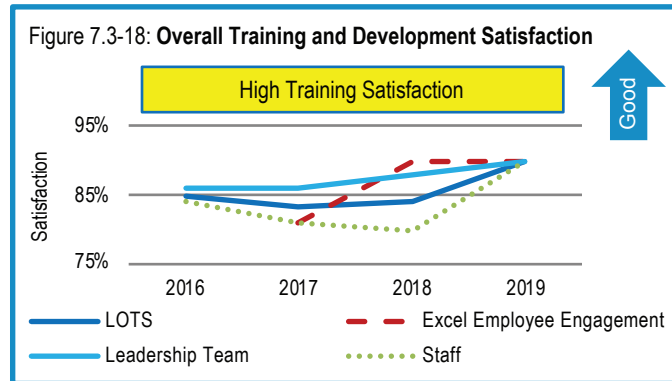
Excel Employee Engagement results show the top quartile. Results in the Excel Employee Engagement survey assessing the organization’s overall engagement exceed the health top-quartile benchmark (*Figure 7.3-12*). In addition, segmentation by work system demonstrates strong engagement scores in both the tissue and organ work systems (*Figure 7.3-12A*). *Figures 7.3-13 and 7.3-14* shows results from key questions on the survey.

LOTS continues to have consistent organizational retention (*Figure 7.3-15*). Overall workforce satisfaction survey results show a sustained trend and favorable comparison to the external benchmark (*Figure 7.3-16*). Overall benefits satisfaction (*Figure 7.3-17*) 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 7.3-18*) and LOTS’s financial investment in training expenditures per full-time equivalent (FTE; *Figure 7.3-19*). *Figure 7.3-20* 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

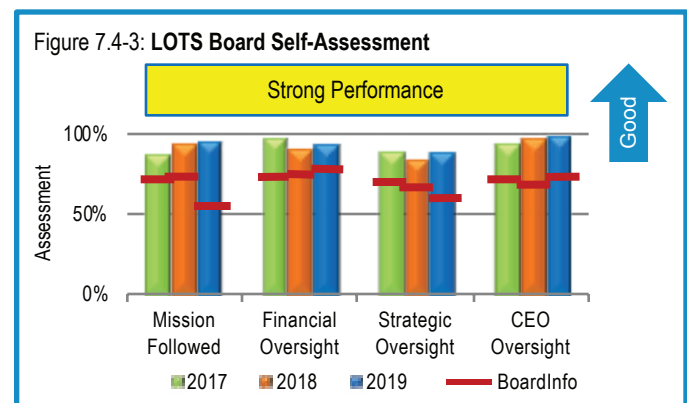
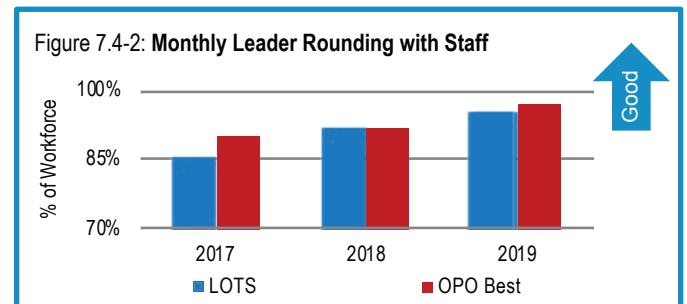
**7.4a(1)** Perception of Leadership (*Figure 7.4-1*) reflects senior leader communication with the workforce, on a scale of 0 to 100%. *Figure 7.4-2* shows the percentage of workforce members touched by leader rounding; LOTS is approaching the AOPO best in class for this measure.

**7.4a(2)** LOTS’s Board Self-Assessment (*Figure 7.4-3*) compares favorably to the benchmark.

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 7.4-1: Perception of Leadership**

Leadership	Measure	2017	2018	2019
Deploy vision and values	Workforce Survey	90	92	94
	Customer Survey	90	91	93
	Donor Family Survey (new)	—	—	95
Encourage 2-way communication	Workforce Survey	85	90	93
	Customer Survey	90	92	93
	Donor Family Survey	—	—	90
Create a focus on action	Workforce Survey	80	85	88
	Customer Survey	85	85	86
	Donor Family Survey	—	—	92



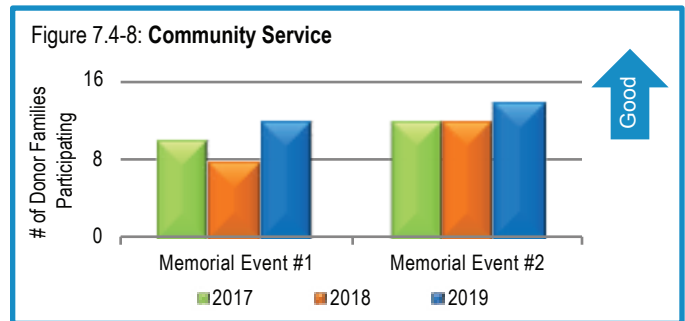
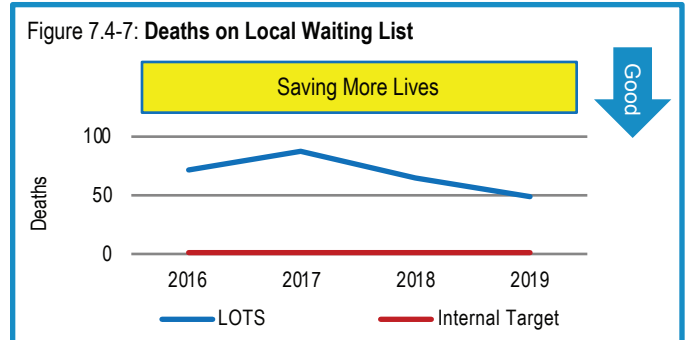
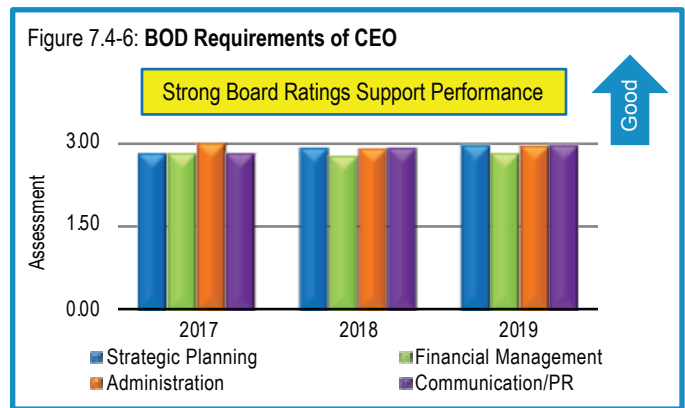
**7.4a(3)** LOTS views accreditation and regulatory compliance as a baseline expectation for performance. The organization has received full accreditation from all voluntary accrediting bodies within its industry and has maintained this trend for several years. Additionally, LOTS maintains full compliance with regulatory and legal mandates that have been sustained since the organization’s inception (*Figure 7.4-4*).

**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. Currently, 100% of the workforce and board is CCP-trained. Limited corporate compliance issues are noted in Report of Corporate Compliance Hotline Issues (*Figure 7.4-5*), which illustrates program effectiveness. Stakeholder (BOD) requirements show a high level of satisfaction (*Figure 7.4-6*) 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.

**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 7.4-7*). In addition, LOTS holds memorial events twice a year in the late spring and before Christmas (*Figure 7.4-8*); it is not unusual for families to wait a year before attending.

Figure 7.4-4: 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
DHHS (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 7.4-5: Corporate Compliance Hotline Issues		
Reported Corporate Compliance Hotline Issues/Outcomes		
2015	0 Complaints Reported	
2016	1 Complaint Reported	Corrective Action Taken
2017	1 Complaint Reported	No Violation Found
2018	1 Complaint Reported	Corrective Action Taken
2019	4 Complaints Reported	Corrective Action Taken

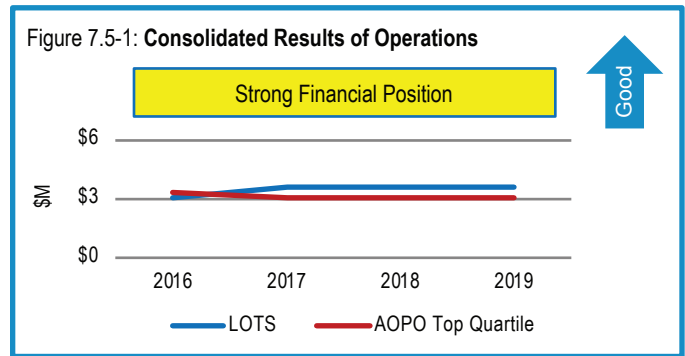


## 7.5 Financial, Market, and Strategy Results

### 7.5a Financial and Market Results

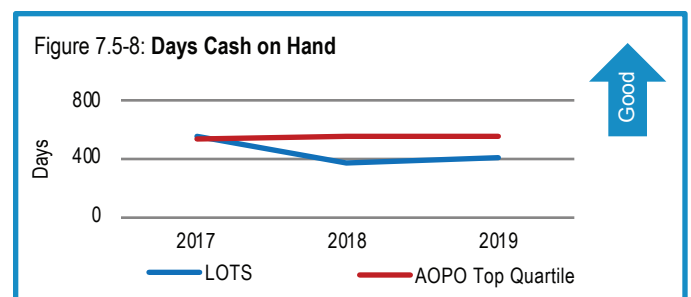
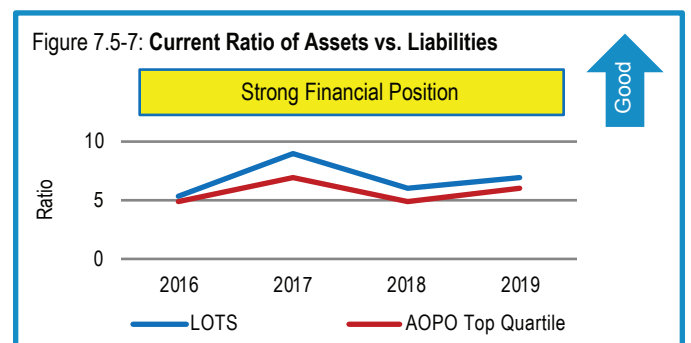
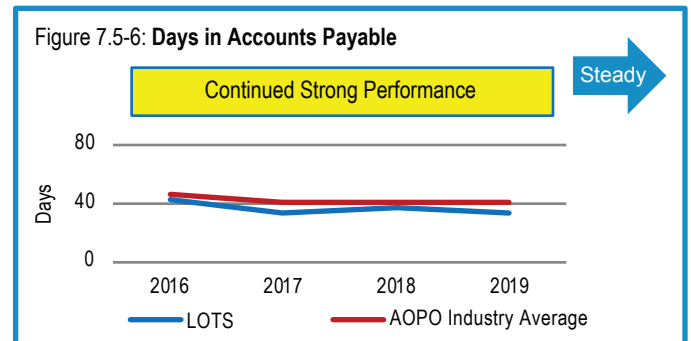
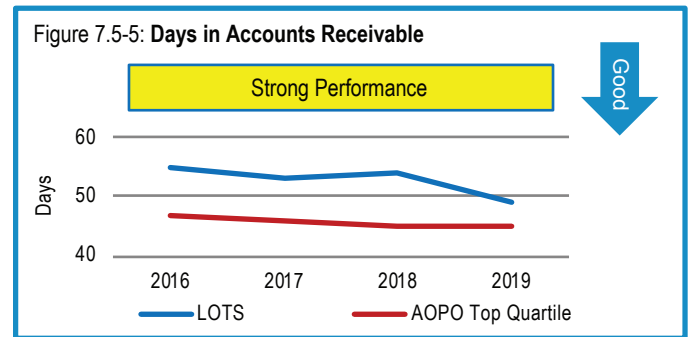
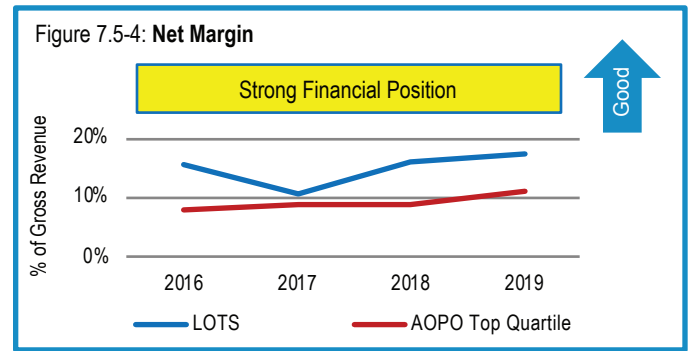
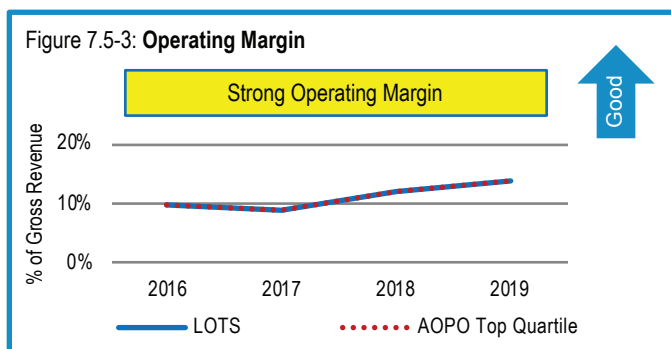
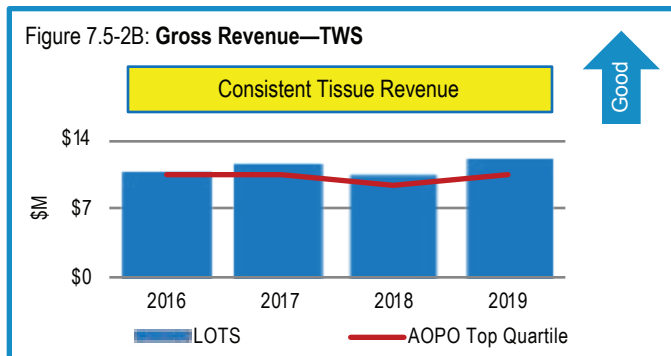
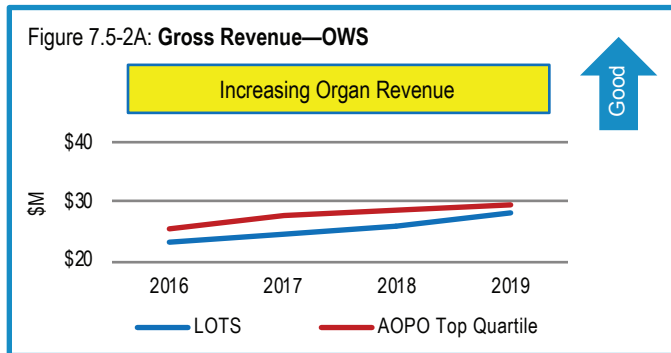
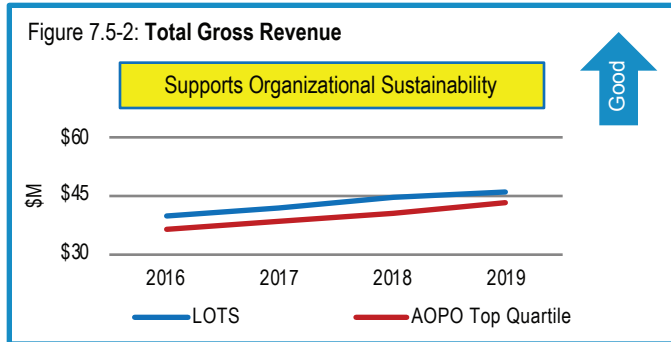
**7.5a(1)** LOTS’s financial performance is benchmarked by evaluating key measures within OPO financial surveys conducted by AOPO. LOTS utilizes the surveys to examine its overall financial condition. The organizational goal is to assess whether LOTS’s financial and operating status are improving over time and against benchmarks.

Consolidated Results of Operations (*Figure 7.5-1*) demonstrates that LOTS is in a strong position with good performance levels compared to budget, with 2019 organizational results of



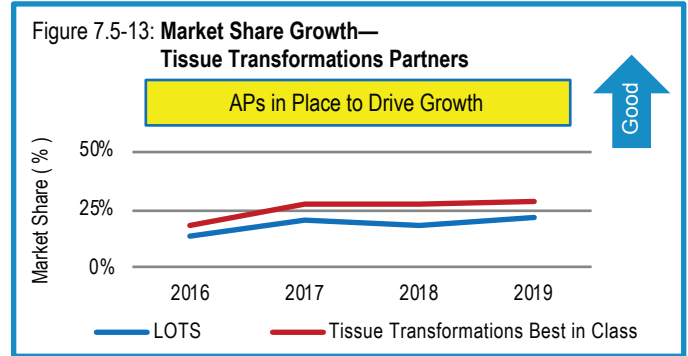
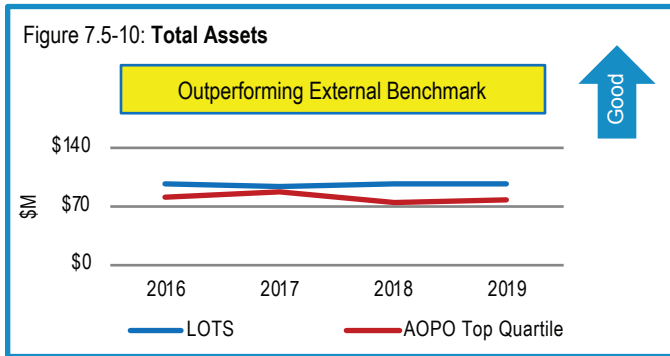
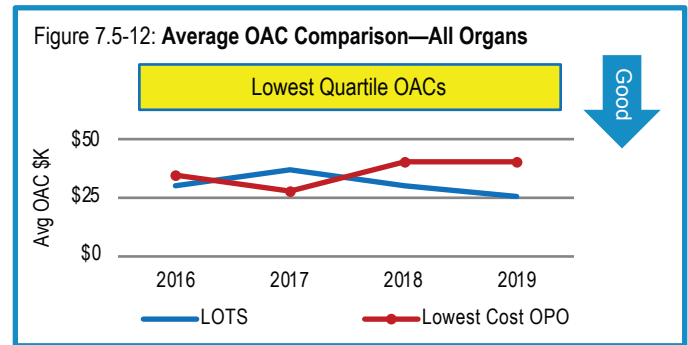
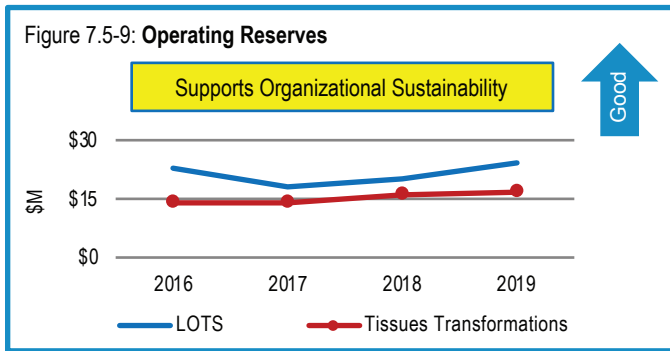
\$3.36 million. LOTS demonstrates favorable levels in several financial measures utilizing the AOPO top-quartile benchmark including gross revenue (*Figures 7.5-2, 7.5-2A, and 7.5-2B*), Operating Margin (*Figure 7.5-3*), Net Margin (*Figure 7.5-4*), Days in Accounts Receivable (*Figure 7.5-5*), Days in Accounts Payable (*Figure 7.5-6*), Current Ratio of Assets versus Liabilities (*Figure 7.5-7*), and Days Cash on Hand (*Figure 7.5-8*). These results reflect LOTS's identified strategic advantage of possessing a strong financial position and support organizational sustainability.

Operating Reserves (*Figure 7.5-9*) 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.





**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. 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 7.5-14*.

The key metrics for strategy achievement of the mission include Deaths on Local Waiting List (*Figure 7.4-7*) and organ and tissue donors by population (*Figures 7.1-4 and 7.1-6*). Results for building and strengthening the CC are given in *Figures 7.3-12 and 7.3-12A*.

One of LOTS opportunities is to increase the donor registry. Measures being tracked for new partnerships to educate the public about organ donation and encourage people to register as donors at state DMVs and local workplaces are AOS.

