* 1. **Organizational Description P.1a Organizational Environment**

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| **#** | **Key Factors** |
| 1 | **Organizational Environment:*** Located in Columbia, North Takoma
* 1 of 58 federally designated, nonprofit, regional organ and tissue procurement organizations (OPO) is the US
* Services provided for more than 25 years
* Serves 3.2 million people
* Federally assigned territory of 62 counties located within North Takoma (NT) and South Takoma (ST)
 |
| 2 | **Key product and service offerings:*** Facilitation of organ and tissue donation
* Accomplished through two work systems: Organ and Tissue

**Key delivery methods**:* Through coordination with partners, collaborators, and key suppliers via the Partnership Model (P.1-2)
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| 3 | **Mission, Vision, and Values:**Vision: Organs and tissues are always available Mission: We save and improve livesValues: Compassion, Teamwork, Honesty, Quality, ImprovementCulture: VMV serve as the foundation for the culture and the basis for how the organization is managed |
| 4 | **Core Competencies:*** Mission-driven workforce
* Care and compassion delivered by the “human touch”
* Actions and behaviors by staff are directly linked to creating a positive donation experience for the donor family (collaborators)
 |
| 5 | **Workforce Profile:*** 100 employees
	+ Decentralized
	+ 10% leadership
	+ 65% female
* Tenure
	+ 1 year or less = 20%
	+ 2-5 years = 41%

o 6-10 years = 21%* + 11+ years = 18%
* Ethnicity
	+ White = 70% (DSA = 70%)
	+ African-American = 20% (DSA = 25%)
	+ Other = 10% (DSA = 5%)
* No volunteers

**Recent Changes:*** Expanding clinical and nonclinical staff due to increased donations
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| 6 | **Workforce Groups:**Segmented by work system and department* Organ Work System (OWS) manages the Procurement Process for organs
* Tissue Work System (TWS) manages the Procurement Process for tissue
* Support Departments provide the infrastructure to maximize organizational performance

**Key Drivers of Workforce Engagement:*** Staff connection to the mission
* Employee benefits
* Relationships with coworkers

**Bargaining Units:*** No bargaining units
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| 7 | **Special Health/Safety Requirements:*** Clinical safety
* Safe work environment for after-hours staff members
	+ Reserved parking spots
	+ Secured parking
	+ Sensor lighting
 |
| 8 | **Key Assets:*** Custom-built facility in Columbia, NT
	+ Critical care unit
	+ Fully equipped operating room (OR)
* Clinical technologies and equipment
	+ X-Ray
	+ Ultrasound
	+ Typical operating room equipment
* Twin-engine turbo prop plane – equipped with medical equipment
* Technology
	+ Electronic Medical Record system (EMR)
	+ Reporting Services for Customized Reports
 |
| 9 | **Regulatory Environment:*** Mandatory
	+ CAP – Safe Laboratory Practices
	+ CMS – Billing and Performance Requirements
	+ EEOC – Employment Practices
	+ FDA – Compliance with Requirements
	+ DoL – Employment Practices
	+ IRS – Nonprofit Requirements
	+ OSHA – Workplace Safety
	+ Local environmental and regulatory initiatives – fire and sanitary measures
	+ Local and state regulations – biohazard trash disposal
* Voluntary
	+ UNOS/OPTN – Organ Allocation/Operational Oversight
	+ AATB – Standards for Tissue Banking Accreditation
	+ AOPO – Standards for Organ Procurement Accreditation
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P.1b Organizational Relationships

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| 10 | **Organizational Structure:*** Private, nonprofit 501(c)(3)
* Voluntary, community-based Board of Directors
	+ Comprised of hospital executives, physicians, and donor family members
	+ Representatives from key donor hospitals (partners) and transplant centers (customers) are appointed
* CEO – reports to the governance board; directs the Executive Leadership Team (ELT)
	+ Chief Medical Officer (CMO)
	+ Chief Homan Resources Officer (CHRO)
	+ Chief Financial Officer (CFO)
	+ Chief Operating Officer (COO)
* Leadership Team (LT) consists of the ELT, directors, managers, and supervisors
 |
| 11 | **Key Customer Groups / Requirements:*** Transplant Centers – Organ
	+ Premier Health
	+ Columbia University Hospital
	+ Premier Children’s Hospital
	+ Columbia Children’s Hospital
* Tissue Processors
	+ Tissue Transformations
	+ LifeBank
	+ Advantage Life

**Customer Differences:*** Transplant Center Requirements:
	+ Maximize Donation
	+ Information
	+ Competence
* Tissue Processors Requirements
	+ Maximize Donation
	+ Information
	+ Accountability
 |
| 12 | **Key Stakeholder Groups / Requirements:*** Communities within Service Area
* Workforce
* Board of Directors

**Stakeholder Differences:*** Communities
	+ Comply with legal, ethical, and regulatory requirements while providing quality organs and tissues
* Workforce
	+ Connection with the vision, mission, and values
	+ Excellent benefits
	+ Coworkers
* Board of Directors
	+ Strategic Planning
	+ Administration
	+ Financial Management
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| 13 | **Key Suppliers / Role:*** Guardian Ambulance
* Write Brothers Charter
* Titan Technologies (TT)
* Transplant Technologies
* Columbia Cremation
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| 14 | **Key Partners / Role:*** Donor Hospitals
* Medical Examiners
* Hospice

**Key Collaborators / Role:*** Organ and Tissue Donor Families
* Funeral Homes
 |
| 15 | **Two-Way Communication Mechanisms:**Response not provided **Contribution to Innovation:** Response not provided |
| 16 | **Key Supply-Network Requirements:*** Suppliers
	+ Accurate Information
	+ Service Quality
	+ Timely Communication
* Partners
	+ Respect / Sensitivity
	+ Information
	+ Service Quality
* Collaborators
	+ Organ and Tissue Donor Families
		- Compassion
		- Stewardship of the Gift
		- Honor the Donor
	+ Funeral Homes
		- Communication
		- Service
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* 1. **Organizational Situation P.2a Competitive Environment**

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| 17 | **Competitive Position / Relative Size:*** Ranks 40th among the existing 58 OPOs in terms of population living within its DSA
* As a federally designated OPO within its service area, the organization does not have traditional competitors
* It is a regulated monopoly that operates solely within the borders of its designated service area
* Must meet national performance standards set by the Centers of Medicare and Medicaid Services (CMS) to maintain position
* Tissue Work System
	+ donor hospitals required by law to report all deaths to the organization
	+ donor hospitals may contract with another tissue bank for the recovery process
	+ the organization contracts with 100% of its 80 donor hospital partners

**Growth:*** Growth in donation must come from increases in medically eligible candidates from within the DSA
	+ families that authorize donations
	+ identification of nonhospital referral sources

**Competitors:** |
| 18 | **Competitiveness Changes:*** No key changes based on “monopoly-based” competitive position.
 |
| 19 | **Comparative Data – Inside Industry:*** Organ industry – select industry benchmarks available; up to several month delay in obtaining data
* Tissue processor – comparative data are limited; processors provide monthly scorecards for select results
* OWS
	+ AOPO
	+ OPTN / SRTR
* TWS
	+ AOPO
	+ Tissue Processors
* Key Support Processes
	+ AOPO
	+ Board Information
	+ DHSS
	+ US DoL

**Comparative Data – Outside Industry:** Response not provided**Limitations to Obtain:** Response not provided |

P.2b Strategic Context

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| 20 | **Strategic Challenges:*** Business – Industry Changes
* Operational – Authorization
* Societal responsibility – Increase Registry
* Workforce – Retention
 |
| 21 | **Strategic Advantages:*** Business – stakeholder satisfaction
* Operational – Facilities and Equipment
* Societal Responsibility – Baldrige Business Model
* Workforce – Supportive Culture
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P.2c Performance Improvement System

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| 22 | **Performance Improvement System:*** Business Model – Baldrige Criteria for Performance Excellence
* Improvements identified and implemented through the Strategic Planning Process and Operational Management Process
* Performance improvement staff are part of the Quality/Regulatory department with the overarching organizational goal of improvement
* PDSA

**Evaluation / Review Processes:*** + Feedback into the Strategic Planning Process
	+ Key Business Process monitoring
	+ Performance Measurement System (PMS)
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