

OPTN STRATEGIC PLAN 2018-2021

We bring data and people together. We use technology to make data easier to share and easier to understand, and we deliver information in the time, place, and manner that people can use it best. We are teachers and coaches in evidence-driven efforts to improve performance in our own work and in our members'. We automate simple tasks and fully engage our creative analytical capabilities for impactful, behavior-changing work. We are a source of best practices, collegial connections, and the very latest information about how to best serve the patients who are waiting for organ transplants.

Mission:

Our mission is to advance organ availability and transplantation by uniting and supporting our communities, including transplant and organ donation professionals, patients, and donor and recipient families, for the benefit of patients through education, technology and policy development.

Vision:

Our vision is to promote long, healthy and productive lives for persons with organ failure by promoting maximized organ supply, effective and safe care, and equitable organ allocation and access to transplantation.

Values:

Our values guide our behaviors as we pursue our mission, vision and strategic goals.

- **Stewardship:** We act on behalf of those we serve to manage the resources and gifts entrusted to us, especially the gift of life.
- **Unity:** We work collaboratively and respectfully, guided by consensus-building, sharing responsibility, time, and abilities.
- **Trust:** We demonstrate integrity and reliability through consistency, openness, and honesty.
- **Excellence:** We achieve high quality through measurement, evaluation, and continuous improvement of our standards, processes, and effectiveness.
- **Accountability:** We take ownership of our actions and fulfill our commitments to our stakeholders and each other.

2018-2021 STRATEGIC GOALS

Goal: Increase the number of transplants

Core activities:

Serving as the OPTN, UNOS maintains the national transplant candidate waiting list and operates a 24/7 electronic matching system accessible to every OPO and transplant center in the country. UNOS also operates a 24/7 Organ Center, a live call center to assist OPOs and transplant centers with questions, transportation arrangements, and with placing organs. UNOS also runs the OPTN kidney paired donation pilot program, providing a transplant option for kidney candidates who have a living donor who is medically able but cannot donate a kidney to their intended candidate because they are incompatible.

Resource Allocation Benchmark: 40%

Initiatives:

- Pursue policies and system tools (e.g. donor offer filters) for more efficient donor/recipient matching to increase organ utilization.
- Increase the number of kidney transplants arranged through kidney paired exchange programs.
- Expand the use of collaborative improvement methodologies and models to increase organ utilization.
- Evaluate metrics and monitoring approaches for increased collaboration and performance improvement activities when assessing transplant program and OPO performance.
- Promote knowledge of and increase implementation of effective donation and procurement practices.
- Improve ability to perform analysis of refusal reasons.

Key metrics:

- By 2021, a decrease in time from first organ offer to acceptance for kidneys.
- By 2021, an increase in national offer acceptance rates.
- By 2020, an increase in transplants performed through kidney paired donation.
- By 2020, an increase in utilization of organs from participants in collaborative improvement programs.
- By 2021, provide expanded communication and educational materials on decreasing barriers to living donation.

Goal: Provide equity in access to transplants

Core activities:

Through a consensus-driven and transparent process, UNOS brings together a group of individuals with diverse backgrounds and professional perspectives to develop equitable allocation policies. The OPTN/UNOS Board of Directors and advisory committees are comprised of transplant and donation professionals, patients, living donors, and donor and recipient family members who bring varying and unique perspectives to produce policies that are equitable across all

patient populations.

UNOS research staff aggregate national OPTN data and analyze trends in transplantation, which allows for the identification of inequities among transplant patient populations.

UNOS monitors allocation matches to ensure organ allocation policies are followed and fosters public trust in the national transplant network through public communications.

Resource Allocation Benchmark: 30%

Initiatives:

- Improve equity in transplant opportunities for multi-organ and single organ candidates.
- Reduce geographic disparity in access to transplant.
- Develop a common policy framework for applying principles of geographic distribution to allocation policies across all organ systems.
- Increase racial, ethnic, and professional diversity on the Board and committees to ensure a variety of perspectives are offered in the policy development process.
- Increase opportunities for volunteer engagement and awareness of OPTN/UNOS Board and committee opportunities.
- Improve member and public engagement in the development of equitable allocation policies.
- Develop an equity benchmark for candidates for each organ.
- Analyze data on vulnerable populations, including racial and ethnic minority groups, age groups, and populations with physical/mental disabilities.

Key metrics:

- By 2021, the volunteer workforce will reflect the patient and professionals served by the OPTN/UNOS.
- By 2020, an increase in the number of OPTN/UNOS volunteers who have an official assignment or role.
- By 2019, at least a 10% increase in pool of interested volunteers to populate Board and committees.
- By 2020, increase the median of individuals per cycle participating in the OPTN public comment period.
- By 2019, develop an equity measure for candidates for each organ and measure equity in allocation, including geographic disparities and multi-organ disparities.
- By 2021, a common policy framework for geographic distribution of organs will be in effect.

Goal: Promote efficiency in donation and transplant

Core activities:

The OPTN is funded through registration fees paid by transplant hospitals and through appropriated federal dollars through HRSA. UNOS has a responsibility to manage those funds wisely, as well as to understand the impact OPTN policies and operations may have on the professionals in the donation and transplant community. UNOS uses a Baldrige quality improvement framework to improve the effectiveness and efficiency of OPTN operations.

UNOS collects, calculates, and distributes information to members through UNetSM, and is constantly working to automate these systems to reduce the administrative burden of working with the system.

UNOS evaluates all potential OPTN policies for potential financial impact on the OPTN and on members.

Resource Allocation Benchmark: 10%

Initiatives:

- Modularize and simplify UNetSM architecture to expedite system changes and improve quality.
- Achieve continuous level of UNetSM accessibility.
- Improve efficiency in the policy development and implementation process.
- Improve volunteer workforce satisfaction and engagement.
- Increase seamless data exchange between members and UNetSM to reduce data burden and improve data integrity.

Key metrics:

- By 2021, maintain or exceed 99% availability of time critical applications/functions within UNetSM.
- By 2021, reduce the time from Policy Oversight Committee project approval to Board approval or end of project.
- By 2021, time from Board approval to IT start of project will be a maximum of 3 months for 50% of projects.
- Maintain minimum of 90% of projects approved by the Board being implemented within 12 months of approval.
- By 2021, members can submit 50% of our required data through an application program interface (API).
- By 2020, 95% of centers and OPOs utilizing the dataportal.

Goal: Promote living donor and transplant recipient safety

Core activities:

The OPTN/UNOS establishes minimum membership requirements for key personnel at transplant programs, OPOs, and histocompatibility laboratories. UNOS operates the OPTN patient safety portal that allows member programs to report potential patient safety events. UNOS conducts routine on-site audits to evaluate member compliance with OPTN policies and reviews transplant program and OPO performance including outcomes and activity levels. Through a confidential medical peer review process, the OPTN/UNOS may investigate potential member institutions non-compliance with OPTN obligations and the Board of Directors may take member actions.

Resource Allocation Benchmark: 10%

Initiatives:

- Improve accuracy in HLA reporting.

- Continue to emphasize and underscore the MPSC's emphasis on performance improvement.
- Enhance sharing of knowledge about safety events, near misses, and effective practices across the transplant community.
- Enhance system capability for reporting data regarding safety elements.

Key metrics:

- By 2021, increase percentage of members' feedback that the MPSC is focused on compliance, safety and improvement, as opposed to only compliance and safety
- By 2020, an increase in the number of members who respond that the peer review process is valuable in process improvement.
- On an annual basis, a minimum of 20 reported referrals sent from Member Quality to Professional Education or OPTN/UNOS committees to be addressed through communications or educational offerings.

Goal: Improve waitlisted patient, living donor, and transplant recipient outcomes

Core activities:

UNOS aggregates national OPTN data and analyzes trends in transplantation and provides meaningful and actionable reports and tools to members that contribute to the collective knowledge of effective organ transplantation.

Resource Allocation Benchmark: 10%

Initiatives:

- Improve longevity of organ transplants.
- Evaluate effective methods for assessing living donor outcomes.
- Enhance transplant program tools and education in the selection and follow up of living donors.
- Expand the use of collaborative improvement models to promote effective donor management practices that affect transplant outcomes and to promote effective long-term outcomes.
- Develop tools to calculate survival benefit to inform center practices, patient management, and OPTN policy development.
- Analyze outcomes for vulnerable populations, including racial and ethnic minority groups, age groups, and populations with physical/mental disabilities.

Key metrics:

- By 2021, a decrease in waitlist mortality.
- By 2021, maintain or increase 1-year graft and patient survival rates.
- By 2021, an increase in the 5-year graft and patient survival rates.