# **Transplant Center Staff Management:** FTE Workload Planning

#### **TODAY'S PANELISTS**



#### Jaison Abraham

MBA, LSSBB Director of Transplant Programs





#### **Angie Korsun**

Executive Director of Advanced Organ Management



Banner Health System



Leadership & Engaged Learning in Organ Donation & Transplantation

Tuesday, November 1, 2022, 3:00pm – 4:00pm ET

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**Deanna Fenton** Program Manager **⊗Alli**<sup>™</sup>ance

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# **Meet Our Moderator**



#### **Karri Hobson-Pape**

**Executive Director** 





# **Meet Our Panelists**



#### **Jaison Abraham**

MBA, LSSBB Director of Transplant Programs

## Angie Korsun

Executive Director of Advanced Organ Management

Banner Health System





Leadership & Engaged Learning in Organ Donation & Transplantation Angie Korsun, RN, MSN, MPA Executive Director, Advanced Organ Management, Transplant, MCS Banner University Med Ctr Tuc/Phx Transplant Center Staff Management: FTE Workload Planning

The Alliance: Nov 1, 2022

# Background

What constitutes adequate staffing? What is the magic number/FTE? Obviously, we all need some methods for assessing adequate staffing levels For Transplant programs, there is a limited number of metrics or benchmarks that are available to support such FTE justifications

Action O-I and Vizient data reports simply do not have any elements that reflect transplant programs. The only consistent data source available is the Unet Staffing survey that is collected annually MGMA has some data that be useful for medical office staffing

## Other issues

- What does your C-suite use or trust as a data source to measure adequate staffing?
- What does your Finance department utilize to generate productivity reports?
- Many of these reports are based on either IP census, procedure counts or in OP areas, clinic encounters
- Traditionally, in many organizations with transplant programs, the number if transplant events was the metric used to determine staffing levels.
- However, this causes tremendous swings in "productivity levels" if you are not a high volume center with consistent monthly volume.

# Issues (con't)

- Am sure many of you have had questions asked when your transplant volume was low or less than predicted and someone asks why you are not flexing down your staffing.
- Explaining that the transplant event is not where the bulk of the transplant team members are expending their efforts. The txp event is worked by the OR ,ICU staff as well as staff on the IP surgical units.
- The real work of the transplant team is in managing the referrals, evaluations, clinic visits, waiting list and post transplant patient management
- While some of the team may also have some IP activity as part of their roles, such as case managers, txp coordinators and MSW's, plus others. The bulk of the teams efforts are on the OP side of equation.

## Metrics to be measured

- What makes the most sense to count
- What are the most frequent activities that consume staff time
- What can you realistically measure consistently & accurately
- Can you leverage your EMR or program database to count any of these items
- Items that could be counted: referrals, evaluations, listings, clinic encounters (pre and post), waitlist volume, transplants, post txp patients managed by the program, phone encounters, prescriptions ordered and refilled; labs reviewed and managed, etc.

# Metrics, (con't)

- What are the metrics that your Finance department counts
- Do they understand why you want to count these unique metrics for the transplant program
- Will they accept the metrics and the accuracy of your reporting?
- Is there a way to validate the data that can ensure accuracy and stand up to audit
- Can the reporting fit into the productivity reporting schedule that Finance uses?

# Engagement

- Once you have figured out what you want to count and how you will collect the data, need to present this plan to both Csuite and Finance.
- The Senior management team needs to understand why the current metrics are not an accurate reflection of the work being done by the team
- How does this change fit into the overall data collection and productivity monitoring by the organization or the health system
- If health system, may be more challenging to get buy in

Orga	Organ Program		Event		Organ		Jul-	20		Aug	-20	Sep	-20	Oct	-20	Nov	-20
Orga	in Frogram		Lvent		Source	A	ctual	Budget	A	ctual	Budget	Actual	Budget	Actual	Budget	Actual	Budget
	Kidney	*	Donor Assessments		LD		13	15.0		10	15.0	<b>—</b> 15	15.0		#VALUE!		#VALUE!
	Kidney	*	Donor Assessments	WH	LD		195	225.0		150	#VALUE!	225	#VALUE!		#VALUE!		#VALUE!
cost center	Kidney	*	Donor UOS		LD			#VALUE!			#VALUE!		#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Kidney	Adult	Transplants		LD		5	5.0	$\frown$	8	5.0	<b>A</b> 11	8.0		#VALUE!	#VALUE!	#VALUE!
	Kidney	Pediatric	Transplants		LD		1	1.0		1	-	#VALUE!	1.0	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Kidney	*	Referrals		DD		10	15.0		15	20.0	<b>V</b> 1	20.0		#VALUE!		#VALUE!
	Kidney	*	Unique Referrals	1	DD	#\/,	ALUE!	#VALUE!	#∨	ALUE!	#VALUE!	#VALUE!	#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Kidney	*	Referrals	WH	DD		60	40.0		60	50.0	<b>V</b> 15	50.0		60.0		#VALUE!
	Kidney	*	Evaluations		DD		15	20.0		20	#VALUE!	17	#VALUE!		#VALUE!		#VALUE!
	Kidney	*	Evaluations	WH	DD		600	#VALUE!		300	#VALUE!	255	#VALUE!		#VALUE!	-	#VALUE!
cost center	Kidney	*	UNOS Registrations		DD		5	#VALUE!		8	#VALUE!	10	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
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	Kidney	Pediatric	Transplants		DD	′#V.	ALUE!	#VALUE!	. #V	ALUE!	#VALUE!		#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Kidney	*	Clinic Visits (Pre-Transplant)		DD		30	#VALUE!		30	#VALUE!	33	#VALUE!		#VALUE!		#VALUE!
	Kidney	*	Clinic Visits (Pre-Transplant)	WH	DD		60	#VALUE!		60	#VALUE!	66	#VALUE!		#VALUE!		#VALUE!
	Kidney	*	Patients Managed (Waitlist)		DD		400	#VALUE!		425	#VALUE!	450	#VALUE!		#VALUE!		#VALUE!
	Kidney	*	Patients Managed (Waitlist)	WH	DD		400	#VALUE!	_	425	#VALUE!	450	#VALUE!	-	#VALUE!	-	#VALUE!
	Pancreas	*	Referrals			_#V.	ALUE!	#VALUE!	. #V	ALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Pancreas	*	Unique Referrals			#V/	ALUE!	#VALUE!	#∨	ALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Pancreas	*	Evaluations			#V/	ALUE!	#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Pancreas	*	UNOS Registrations			#V/	ALUE!	#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Pancreas	*	Transplants			#V.	ALUE!	#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Liver	*	Referrals					#VALUE!			#VALUE!		#VALUE!		#VALUE!		#VALUE!
	Liver	*	Unique Referrals			#V.	ALUE!	#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Liver	*	Referrals	WH			-	#VALUE!		-	#VALUE!	-	#VALUE!	-	#VALUE!		#VALUE!
	Liver	*	Evaluations					#VALUE!			#VALUE!		#VALUE!		#VALUE!		#VALUE!
	Liver	*	Evaluations	WH			-	#VALUE!		-	#VALUE!	-	#VALUE!	-	#VALUE!	-	#VALUE!
	Liver	т Т				#V/		#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
	Liver	* *			<u> </u>	#V.	ALUE!	#VALUE!	#V	ALUE!	#VALUE!	#VALUE!	#VALUE!		#VALUE!	#VALUE!	#VALUE!
	Liver		Clinic Visits (Pre-Transplant)					#VALUE!			#VALUE!		#VALUE!		#VALUE!		#VALUE!
	Liver	*	Clinic visits (Pre-Transplant)	WH				#VALUE!		-	#VALUE!	-	#VALUE!		#VALUE!		#VALUE!
	Liver	т ±	Patients Managed (Waitlist)					#VALUE!	_		#VALUE!		#VALUE!		#VALUE!		#VALUE!
	Liver	*	Patients Managed (Waitlist)	WH			-	#VALUE!		-	#VALUE!	-	#VALUE!	-	#VALUE!	-	#VALUE!

# Time study of pertinent metrics

		Productivit				
Median t	ime per event	Kidney	Liver	Heart	Lung	Hours
	New Referral	6	6	6	e	5 per referral
	LD referral (kidney only)	3				
	Evaluation	18	18	18	18	3 per evaluation
	LD evaluation	10				
	Wait list MNgt WH	2	2	2	2	2 hrs/# of pts on WL
	Pre-Tx Clinic Visits WH	2	2	2	2	2 per clinic visit
	Total Pre-Tx WH	mult vol by WH	mult vol by WH	mult vol by WH	mult vol by WH	
	Post txp mngt WH	2	. 2	2	2	per patient being actively followed by program
	Post Tx pts managed	500	150	150	100	)
	Post-Tx Clinic Visits WH	2	2	2	2	2 per clinic visit
	Total Post-Tx WH	mult vol by WH	mult vol by WH	mult vol by WH	mult vol by WH	
Secondai	ry metric	Volume				
	Transplant cases					By organ: kidney, KP, Liver, heart , lung

# Spreadsheet clarification

- Tool used is simple spreadsheet with pertinent metrics that were identified and could be collected
- Calculations are based on what was determined as median time spent in completing the particular metric by aggregate team members
- Therefore, the median time spent on tasks identified can vary from facility to facility. Can be calculated by doing time study or discussion/time tracking by pertinent team members for a period of time to validate what are probably pretty accurate "guesses" by team.

## Spreadsheet clarification

- Once there is agreement on the various metrics and time commitment for tasks:
- Need consistent collection process
- Need SMT and Finance buy in as to data accuracy and validity
- If Finance can accept data on regular basis and incorporate into productivity reporting, that is best option
- If Finance cannot accept the data into the standard productivity reports, then spreadsheet can be used as a reference tool to review quarterly for trending and justification for staffing

## Summary

- This process and tool is far from perfect and is one of several tools that other individuals may have developed
- This is a summary document for the metrics that likely most of us are tracking in some form
- Can be an adjunct to other justification tools that are used at different facilities and programs based on what is deemed as acceptable at the particular organization
- May not be ideal for all circumstances or teams
- Need to remain flexible

# QUESTIONS?

# A Transplant Center Staff Management: FTE Workload Planning Strategy



We as operators in transplant centers must deal with the ebb and flow of the volumes and complexity of transplant care processes which makes workforce planning difficult.

I believe the key is to listen.

#### Staffing Projection Tool | Indexing #

1

Benchmark Group	Kidney TX, National, All Adult Centers, Academic, Non-Profit								
Last Updated	1/1	/22							
Postion	Resource Type (H,P)	FTE:TX Ratio							
Transplant Surgeon	P	0.016835017							

Understands Current Labor Model & Develop a Forecast Tool That Works for You



Lean Into Talking About 'The Good, Bad and the Ugly'



or navigate to the Alliance Community Resource Toolbox

#### **GENERAL DISCLAIMER**

- THIS IS NOT A TOOL CREATED BY UNOS OR OTHER AGENCY. Just a new transplant administrator trying to help the community. I am not an expert!
- MAKE SURE YOU UPDATE TOOL WITH YOUR STAFFING SURVEY DATA!! You cannot just add your staffing and projections. You must update tab #!
- TOOL IS WITHOUT WARRANTY OF ANY KIND, EITHER EXPRESS OR IMPLIED. Make sure you doublecheck calculations as this spreadsheet is not locked-down from editing.
- FEEL FREE TO EDIT AND IMPROVE THE TOOL! Please consider sharing with me. My email is jabr0001@shands.ufl.edu

Paste	<u>À · A</u> · □ = = =   ≫ · □   \$ · % <b>)</b>   \$	0 →0 Format v Sort	& Find & Analyze Create and Share r Select Data Adobe PDF
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YOU MUST GO TO UNOS W THIS SPREADSHEET WILI	EBSITE AND PULL BENCHMARK RATIO NOT FUNCTION PROPERLY AND YOU PROG	NFAIVIEE NS FOR YOUR PROGRAM. IF YOU DO NOT DO WILL GET A STAFFING MODEL THAT DOES NO GRAM	D THIS CRITICAL STEP, DT APPLY TO YOUR
FTE:TX Ratios	Update data in this column every time new benchmark data	FTE:Pre-TX Evaluations	Update data in this column every time new benchmark data

Projections | # of PreTX OVs

Field Name Code

Surg\_MD\_EVA

Med MD EVA

PA ARNRP EVA

PRE Cord EV

WL\_Cord\_EV

POST\_Cord\_EV

Projections | # of PostTX O

Staffing Ratie

120 300

Projections | WL Size

Ratio 0.0041

0.0051

#VALUE!

0.0077

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### SAMPLE UNOS Benchmarking Tool | A General Disclaimer

Field Name Code

Surg\_MD

Med MD

PA ARNRI

POST Con

Staffing Ratio

59.400

46.700

36 300

114 7000

Postio

FTE:TX Ratio

0.0168

0.0087

Projections | # of Evals

0.0214

FTE:TX Ratios		Update data in this column every time new benchmark data becomes available			F	TE:Pre-TX Evaluatio	ons	Update data in this column every time new benchmark data becomes available &	
Field Name Code	Postion	Staffing Ratio	ETE:TX Ratio	Update	e the f	ive (5) tables	Postion	Staffing Ratio	FTE:Ref Ratio
Surg MD	Transplant Surgeon	59.4000	0168				Transplant Surgeon	241.1000	0.0041
Med MD	Transplant Physician	46.7000		with late	est UN	OS benchmark		195.6000	0.0051
PA ARNRP	Medical PA/ARNP	39.6000					N/A	#VALUE!	
PRE Cord	Pre Transplant Coordinator	36.3000		9	staffing	ratios		129.3000	0.0077
WL Cord	Waitlist Coordinator	114.7000	0087				Waitlist Coordinator	N/A	#VALUE!
POST Cord	Post Transplant Coordinator	36.1000	0.0277			POST_Cord_EVAL	Post Transplant Coordinator	N/A	#VALUE!
Outrch	Outreach Coordinator	281.9000	0.0035			Outrch_EVAL	Outreach Coordinator	1348.2000	0.0007
Pre NonRN MedicalAsst	Pre Transplant Non-RN Medical Assistant	197.3600	0.0051			Pre_NonRN_MedicalAsst_EVAL	Pre Transplant Non-RN Medical Assistant	1046.8000	0.0010
Post NonRN MedicalAsst	Post Transplant Non-RN Medical Assistant	207.8000	0.0048			Post_NonRN_MedicalAsst_EVAL	Post Transplant Non-RN Medical Assistant	N/A	#VALUE!
Pre TXAssist	Pre Transplant Secretary/Administrative Support (TX Assistants)	62.5000	0.0160			Pre_TXAssist_EVAL	Pre Transplant Secretary/Administrative Support (TX Assistants)	150.3000	0.0067
Best TVAsist	Post Transplant Secretary/Administrative	107.3000	0.0093			Post_TXAssist_EVAL	Post Transplant Secretary/Administrative Support (TX Assistants)	N/A	#VALUE!
POSL_TAASSISL	Pre Transplant Social Worker	86 6000	0.0115			Pre_SW_EVAL	Pre Transplant Social Worker	383.5000	0.0026
Poet SW	Post Transplant Social Worker	156 0000	0.0064			Post_SW_EVAL	Post Transplant Social Worker	N/A	#VALUE!
PUSL_SW	Nurse Educator (For Staff)	3289 5600	0.0003			PT_Educat_EVAL	Nurse Educator (For Staff)	N/A	#VALUE!
PI_cuucat	Nurse Educator (For Patients)	2107 3000	0.0005			RN_Educat_EVAL	Nurse Educator (For Patients)	N/A	#VALUE!
EIN Cord	Financial Coordinator	69 3000	0.0144			FIN_Cord_EVAL	Financial Coordinator	N/A	#VALUE!
Data Cord	Data Coordinator	196 3000	0.0051			Data_Cord_EVAL	Data Coordinator	N/A	#VALUE!
OAPI Cord	OAPI Coordinator	242 4000	0.0041			QAPI_Cord_EVAL	QAPI Coordinator	N/A	#VALUE!
Povch	Psychiatrist/Psychologist	7748 8000	0.0001			Psych_EVAL	Psychiatrist/Psychologist	2069.3000	0.0005
PharmD	Pharmaciet	116 9000	0.0086			PharmD_EVAL	Pharmacist	413.9000	0.0024
Pharmo	Dietitian	170 7000	0.0059			RD_EVAL	Dietitian	566.8000	0.0018
Other	Other Administrative Support	157 6000	0.0063			Other_EVAL	Other Administrative Support	N/A	#VALUE!
TV ID	Transplant Infectious Diseases	432 3000	0.0023			TX_ID_EVAL	Transplant Infectious Diseases	N/A	#VALUE!
TA_ID	Administrative Executive Director	494 4000	0.0020			Exec_Dir_EVAL	Administrative Executive Director	N/A	#VALUE!
ClipDir OprDir	Clinical Director/Operations Director	340 2000	0.0020			ClinDir_OpsDir_EVAL	Clinical Director/Operations Director	N/A	#VALUE!
CINUIT_OpsDif	omical precionoperations precion	340.2000	0.0029		1	Mangr_EVAL	Manager	N/A	#VALUE!

### Tab 1 UNOS Benchmark Data Entry Common Indexing Metrics

#### **Section B**

#### Current-State Health Assessment & Forecasting

**Section A** 

**Operational & Financial Justifications** 

															1								
Staffing Proje	Benchmark Group         Kidney TX, National, All Adult Centers, Academic, Non-Profit           Last Updated         1/1/22						TX Volume Period B CY2023 264	Period C CY2024 280	Period D CY2025 300				If deficient <0.5 If deficient >0.5, but <2.0 If deficient >2.0					Estimated Avg. Cost of Benefits 30%	]			MCR Utilization Rate in Organ 70%	TTL Impact on Budget \$ 1,188,408
Postion	Resource Type (H,P)	FTE:TX Ratio	Persons Copy Info	Current-State Staffing	Staffing Need for Period	Staffing Need for Period	Staffing Need for Period	Staffing Need for Period	Consider Adding for Period	Consider Adding for Period	Consider Adding for Period	Consider Adding fo Period	r Health Check Assessment Curre State Staffing	ent- A	rki od description, summary of deficits and/or other rationale for additional FTEs	# of FTE Being Requested	Avg Hourly Rate Per FTE in USD	Total Annual Expenses for Additional FTEs (SW+Benefits)	Cost Avoidance/Offsets (Supplimental Wage, Contracted Labor/Services etc)	Professional Fees Generated	% Time Resource will Engage in Pre-TD MCR Eligibile Act	Expected Medicare Cost Rembursement	Net Financial Impact on Operating Costs.
Transplant Surgeon	P	0.016835017	Surgeon A (0.8) Surgeon B (1.0) Surgeon C (0.25) Surgeon D (0.1)	2.15	4.04	4.44	4.71	5.05	1.89	1 0.40	1 0.27	<mark>१</mark> 0.34	•	< 4	ne assary detail>	1.00	\$ 50.00	\$135,200	\$0	\$0	30%	\$ 28,392	\$ 106,808
Transplant Physician	р	0.021413276	Physician A (0.9) Physician B (0.9) Physician C (0.9) Physician D (0.9) Physician B (0.9)	4.50	5.14	5.65	6.00	6.42	<u>1</u> 0.64	<u>1</u> 0.51	1 0.34	<u></u> 0.43	•			0.00	\$ 50.00	\$0	\$0	\$0	0%	\$ -	\$ -
Medical PA/ARNP	р	0.025252525	None	0.00	6.06	6.67	7.07	7.58	<b>1</b> 6.06	1 0.61	1 0.40	<mark>1</mark> 0.51	•			3.00	\$ 50.00	\$405,600	\$0	\$0	0%	s -	\$ 405,600
Pre Transplant Coordinator	н	0.027548209	Nurse A (1.0) Nurse B (1.0) Nurse C (1.0) Nurse D (1.0) Nurse E (1.0)	5.00	6.61	7.27	7.71	8.26	<u>1.61</u>	<b>1</b> 0.66	1 0.44	<mark>१</mark> 0.55	•			1.00	\$ 50.00	\$135,200	\$0	\$0	0%	s -	\$ 135,200
Waitlist Coordinator	н	0.008718396	None	0.00	2.09	2.30	2.44	2.62	2.09	0.21	0.14	0.17	•			2.00	\$ 50.00	\$270,400	\$0	\$0	0%	\$ -	\$ 270,400
Post Transplant Coordinator	н	0.027700831	Nurse A (1.0) Nurse B (1.0) Nurse C (1.0) Nurse D (1.0)	4.00	6.65	7.31	7.76	8.31	2.65	<b>1</b> 0.66	<u>1</u> 0.44	<mark>!</mark> 0.55	•			2.00	\$ 50.00	\$270,400	\$0	\$0	0%	s -	\$ 270,400
Outreach Coordinator	н	0.003547357	None	0.00	0.85	0.94	0.99	1.06	1 0.85	0.09	0.06	0.07	•			0.00	\$ 50.00	\$0	\$0	\$0	0%	\$ -	s -
Pre Transplant Non-RN Medical Assistant	н	0.005066883	None	0.00	1.22	1.34	1.42	1.52	1.22	0.12	0.08	0.10	•			0.00		\$0	\$0	\$0	0%	\$ -	\$ -
Post Transplant Non-RN Medical Assistant	н	0.00481232	None	0.00	1.15	1.27	1.35	1.44	1.15	0.12	0.08	0.10	•			0.00		\$0	\$0	\$0	0%	\$ -	\$ -
Pre Transplant Secretary/Administrative Support (TX Assistants)	н	0.016	Employee A (1.0) Employee B (1.0) Employee C (1.0) Employee D (1.0) Employee E (1.0)	5.00	3.84	4.22	4.48	4.80	0.00	0.00	0.00	0.00	•			0.00		\$0	\$0	\$0	0%	\$ -	\$ -
Post Transplant Secretary/Administrative Support (TX Assistants)	н	0.009319664	Employee A (1.0) Employee B (1.0) Employee C (1.0)	3.00	2.24	2.46	2.61	2.80	0.00	0.00	0.00	0.00	•			0.00		\$0	\$0	\$0	0%	s -	s -

Tab 2Primary Staffing Projection ToolSummary of Features

							TX Volume	e Forecasts	He	alth <u>C</u> ł	neck _		
<b>Staffing Proje</b>	ction Too	I Indexing #	t of TXs	Enter TX		Period A	Period B	Period C	Fe	ature t	hat		
				Forecasts	_ /	CY2022	CY2023	CY2024 280		lelps Y	ou		If deficient <0.5
Benchmark Group	Kidney TX, National,	All Adult Centers, Academic,				240	204	200	·	Visuali	ze	_/	If deficient >2.0
Last Updated	N	on-Profit 1/1/22							De	ficien	ries		
Postion	Resource Type (H,P)	Macro to Co Information	py to copy Info	Current-State Staffing	Staffing Need for Period	Staffing Need for Period <del>-</del>	Staffing Need for Period <del></del>	Staffing Need for Period $\overline{\psi}$	Consider Adding for Period	Consider Adding for Period	Consider Adding for Period	Consider Adding for Period	Health Check Assessment Current- State Staffing
Transplant Surgeon	р	0.016835017	Surgeon A (0.8) Surgeon B (1.0) Surgeon C (0.25) Surgeon D (0.1)	2.15	4.04	4.44	4.71	5.05	1.89	1 0.40	1 0.27	1 0.34	•
Transplant Physician	Ρ	0.021413276	Physician (0.9) Physica Physica Physica Physica 9)		5.14	5.65		6.42	<u>2</u> 0.64	2 9		<u> </u>	-
Medical PA/ARNP	Р	0.025252525	Enter your	Calculate T	TL 06	Gree	n Secti	on	<u> 2</u>	Dlug			•
Pre Transplant Coordinator	н	0.027548209	current- staffing allocations	5.00	6.61	displa leve based	ays staf ls need on BM	fing ed Data	r di	splays FTE i	additio additio f done	onal	-
Waitlist Coordinator	н	0.008718396	None	0.00	2.09	2.30	2.44	2.62	2.09	1 0.21	0.14	0.17	•
Post Transplant Coordinator	н	0.027700831	Nurse A (1.0) Nurse B (1.0) Nurse C (1.0) Nurse D (1.0)	4.00	6.65	7.31	7.76	8.31	2.65	0.66	<mark>1</mark> 0.44	¥ 0.55	•

Tab 2Primary Staffing Projection Tool

Current-State Health Assessment & Forecasting Features

t≪0.5 5,but≪2.0 t>2.0		Estima of Be	ate Cost enefits	Estimated Avg. Cost of Benefits 30%	Ento Utiliza Orga MCR Pi	er Medicare ation Ratio f n to generat ickup Estima	or MCR te ates	Utilization Rate in Organ 70%	TTL Impact on Budget \$ 1,188,408
sment Current- ffing	workload desc other othe	for s	Awg Hourly Rate Per FTE in USD	Total Annual Expenses for Additional FTEs (SW+Benefits)	Cost Avoidance/Orrsets (Supplimental Wage, Contracted Labor/Services etc)	Professional Fees Generated	% Time Resource will Engage in Pre-TX MCR Eligibile Act	cted Medicare tembursement	Net Financial Impact on Operating Costs
	<add detail="" necessary=""></add>		\$ 50.00	\$135,200		50	30% \$	28,392	\$ 106,808
8	Space to add	Enter FTEs Count	50.00	\$0	Enter any avoided	costs or	5	-	\$
	justifications	3.00	\$ 50.00	\$405,600	revenu generat	es ed	Estimate the amount of time	÷	Estimate Impact on Operating
	notes	1.00	\$ 50.00	\$135,200	\$0	\$0	resource will engaged in pre- ransplant activitie	S	Expenses
		2.00	\$ 50.00	\$270,400	\$0	\$0	to help estimate MCR pick-up	-	\$ 270,400

Tab 2Primary Staffing Projection Tool

Operational & Financial Justifications Features

Pre	-TX Evaluation	Volume Forec	asts			
Period A	Period B	Period B Period C				
CY2022	CY2023	CY2024	CY2025			
1200	1300	1400	1500			

	If deficient <0.5
lf d	eficient >0.5 , but <2.0
	If deficient >2.0

#### Staffing Projection Tool | Indexing # of Evals

Benchmark Group	Kidney TX, National, All Adult Centers, Academic, Non-Profit
Last Updated	1/1/22

Postion	Filter (1=Include, 0=Exclude)	FTE:TX Ratio	Persons	Current-State Staffing	Staffing Need for Period	Staffing Need for Period	Staffing Need for Period	Staffing Need for Period	Consider Adding for Period	Consider Adding for Period	Consider Adding for Period	Consider Adding for Period	Health Check Assessment Current-State Staffing	
Transplant Surgeon	1	0.004147657	Surgeon A (0.8) Surgeon B (1.0) Surgeon C (0.25) Surgeon D (0.1)	2.15	4.98	5.39	5.81	6.22	2.83	! 0.41	! 0.41	! 0.41	•	
Transplant Physician	1	0.005112474	Physician A (0.9) Physician B (0.9) Physician C (0.9) Physician D (0.9) Physician E (0.9)	4.50	6.13	6.65	7.16	7.67	1.63	! 0.51	! 0.51	! 0.51	•	
Pre Transplant Coordinator	1	0.007733952	Nurse A (1.0) Nurse B (1.0) Nurse C (1.0) Nurse D (1.0) Nurse E (1.0)	5.00	9.28	10.05	10.83	11.60	1.28	1 0.77	! 0.77	! 0.77	•	
Outreach Coordinator	1	0.00074173	None	0.00	0.89	0.96	1.04	1.11	0.89	0.07	0.07	0.07	0	
UNOS BM Staffing Rat	tios Project	ions   # of TXs	Projections   # of Evals	Projections   # o	f PreTX OV	/s P	rojections	# of PostT	x ov	Project	ions   WL	Size	+	
				- 4			4			4				

Tabs for Indexing Other Metrics (Evals, Pre-TX OV, etc)

**Tabs 3-6** 

#### **Projection Tools Indexing Other Common Metrics**



### Lean into the Good, Bad & Ugly

#### Use Tools that Are Familiar to Hospital Leadership to Tell a Story



The Most Important Step Should Start Before You Open Up the UNOS Staffing Survey Portal

Connect the Dots to the Mission, Vision & Values of Your Organization & Use Your Political Capital Wisely! Thank you! Any questions?

# A Special Thanks to Our Panelists



#### **Jaison Abraham**

MBA, LSSBB Director of Transplant Programs



Executive Director of Advanced Organ Management









Leadership & Engaged Learning in Organ Donation & Transplantation