

## **ASTS STRATEGIC PLAN**

2022 - 2027

## **Mission**

ASTS advances the art and science of transplant surgery through patient care, research, education, and advocacy.

## **Vision**

Saving and improving lives through the transformative power of organ donation and transplant surgery.

## **Areas of Primary Focus – Blazing our own TRAIL!**

- **Training & Certification** ASTS will attract and support a diverse workforce of potential transplant surgeons and providers as they enter and advance the field of transplantation surgery worldwide.
- Research ASTS will promote a robust transplant-scientist workforce by providing educational, mentorship, funding, recognition, and networking opportunities and through advocacy on a national level.
- **Advocacy & Patient Care** ASTS will advocate for our patients, members, and the transplant community by promoting donation and transplantation and supporting continuous improvement and innovation for better outcomes.
- **Innovation** ASTS will foster and support the development and implementation of novel technologies to enhance organ recovery, transplantation, and innovative patient care.
- **Lifelong Learning** ASTS will be the national leader in educating transplant surgery teams through member connectivity, mentorship, and knowledge exchange.

## **Organizational Excellence**

ASTS is dedicated to continuing the stability and longevity of the organization. Our leadership has committed to implementing this strategic plan over the next 5 years by ensuring that the necessary resources are available to advance our mission. We will do this through:

- 1. Maintaining and building a strong, diverse, and loyal membership by creating member experiences that are positive, memorable, and reflective of their needs.
- 2. Enhancing connection with membership to maximize collective expertise of engaged members & stakeholders to support ASTS activities & initiatives.
- 3. Continuing to foster strong partnerships between members and staff.
- 4. Using cutting-edge technology to communicate with and educate our members.
- 5. Building and maintaining a strong financial base on which to pursue mission-driven activities.



# ASTS operates by these core values:

**Integrity** — We hold ourselves to a standard of professionalism that includes an awareness of our own imperfections as we seek fairness, justice, and inclusivity. Our behavior is guided by the awareness that we must continuously earn the public trust that makes transplantation possible.

**Excellence** – We commit to setting and achieving ambitious goals as we serve our members, our patients, and society at large.

**Forward Focus** – We look toward the horizon and support those who are crafting innovative solutions to the problems our members and their patients face.

**Respect** – We treat our patients, our colleagues, and our collaborators with respect, engaging in constructive debate and supporting each other in our work to save and improve lives.

**Diversity** — We cultivate the diversity of personal characteristics and individual qualities both in transplantation and among our members. Diversity is integral to the moral code by which we connect lives.

**Compassion** — We strive to emulate the generosity and courage of the donors and their families who make transplantation possible and to offer hope to our patients.

## **TRAINING & CERTIFICATION**

#### **TRAINING & CERTIFICATION**

ASTS will attract and support a diverse workforce of potential transplant surgeons and providers as they enter and advance the field of transplantation surgery worldwide.

- 1. Establish a robust pipeline of students, surgical residents and advanced practitioners through proactive and purposeful engagement.
  - Increase engagement with surgical residents.
  - Engage with medical schools and market to medical students to create a pipeline of budding transplant surgeons. Connect with undergraduate premedical societies and premedical counselors to create opportunities for undergraduate students.
  - Engage and promote APPs in transplantation by:
    - increasing number of APPs involved in ASTS organization,
    - o supporting curriculum development specific for APPs in transplantation to include core patient management and leadership training and mentoring.
  - Expand transplant research opportunities for students, residents, trainees and advanced practitioners and opportunities to present their work.
  - Re-establish transplant surgery as a core requirement of general surgery residency.
  - Identify centers with robust pipelines and disseminate best practices among membership.
- Refine fellowship program accreditation standards and training opportunities.
  - Optimize the standards for accreditation for transplant surgery training programs to include competency criteria and professional development requirements.
  - Utilize fellow feedback and involvement to allow the TACC to assess training program performance.
  - Formalize the program accreditation requirements for FIST track/4+2 training models.
  - Establish career development curricula for fellows within the Academic Universe and at ASTS meetings.
  - Further develop and implement the TACC Certification pathways.
  - Establish international fellowship training opportunities or exchange opportunities.
- 3. Develop strategies to ease the transition from fellowship to faculty and establish programs to support early career faculty development.
  - Develop resources to help demystify the job search process.
  - Develop additional surgical skills training courses.
  - Develop more career development focused content at ASTS meetings.
  - Develop a formal mentorship program for members who are 1-5 years out of training.
  - Promote wellness and explore the rewards of transplant surgery among early career faculty.

#### RESEARCH

ASTS will promote a robust transplant-scientist workforce by providing educational, mentorship, funding, recognition, and networking opportunities and through advocacy on a national level.

- 1. Build a diverse pipeline of surgeon scientists by increasing funding for junior faculty research.
  - Collaborate with the ASTS Foundation to set fundraising goals for annual research grants.
  - Promote expansion and success of the surgeon scientist workforce over the next decade.
  - Increase funding for transplant health disparities research.
- 2. Reduce barriers for underrepresented groups in obtaining research funding.
  - Encourage increased representation/diversity in applicants.
  - Enhance awareness of supplemental funding for minority trainees on NIH grants.
  - Expand the transplant research community by promoting team science.
- 3. Cultivate relationships with NIH and other governmental agencies to support transplant research areas that align with advocacy efforts.
  - Work with NIH and other government agencies to promote transplant collaborative workgroups.
  - Advocate for increased surgeon-scientist career development awards for surgery residents such as "stimulation of research in residency" R38/K38 STaRR awards.
  - Explore a partnership with the American College of Surgeons to establish a pre-K award ACS/NIH mechanism for transplant surgeon-scientists.
  - Explore partnership with NIH to provide education on the surgeon-scientist education and training path for training grant and career development award study section administrative staff and reviewers.
  - Explore partnership with NIH leadership and the NIH Division of Biomedical Research Workforce to designate codes for PIs who are surgery trainees or surgeons to permit longitudinal tracking of surgeon applicants/awardees of career development grants, training grants and research grants.
- 4. Provide mentorship, education and training that stimulates innovation and successful research grant applications to diverse research sponsors.
  - Develop research mentorship programs for trainees and junior faculty.
  - Track the longitudinal outcomes of promising early career surgeon scientist junior faculty.

5. Develop ASTS technological infrastructure to connect research mentor/mentee individuals across diverse programs. Enhance recognition, communication and celebration of surgeon-scientists.

#### **ADVOCACY & PATIENT CARE**

ASTS will advocate for our patients, members and the transplant community by promoting donation and transplantation and supporting continuous improvement and innovation for better outcomes.

- 1. Maintain and build a robust public policy agenda, inspired by dedication to serving patients, and cultivate relationships within the transplant community.
  - Solicit advocacy priorities from ASTS committees, ASTS Council, and other transplant community partners
    to strengthen and build relationships with governmental, political and administrative bodies to realize our
    priority goals.
  - Search out new, and strengthen current, alliances that support the transplant community and our Society.
  - Establish and cultivate an expert cohort of ASTS members to champion the Society's public policy agenda. (Example: ASTS members, ASTS fellows, aspiring students interested in a career in transplantation.) Establish guidelines to ensure this cohort is diverse and representative of our patients.
- 2. Utilize multiple platforms and approaches to educate government officials, community stakeholders, patients, and our fellow members about the latest transplant advocacy issues.
  - Develop a media and branding campaign showcasing the Society's policy and advocacy efforts. Promote ASTS as the transplant community's most well-informed, representative, and effective voice.
  - Cultivate deeper member interest and opportunities for involvement in advocacy issues.
  - Communicate the value of member engagement and clinical expertise in responding to important regulatory and legislative developments in the field.
  - Create an independent source for data analysis to support our advocacy efforts.

## INNOVATION

## **INNOVATION**

ASTS will foster and support the development and implementation of novel technologies to enhance organ recovery, transplantation, and innovative patient care.

- 1. Partner with ASTS members/investigators to develop, pilot, and deploy new technologies and techniques in collaboration with key strategic partners.
  - Improve effectiveness, efficiency, and safety in organ recovery practices by iterative building of an organ recovery collaborative network (ORCN).
  - Establish an innovation community within the ASTS to support members seeking clinical applications for novel approaches to organ preservation, resuscitation, transportation, and transplantation care.
  - Promote ASTS as the primary source for information on technology innovations in transplant care for industry and government.
- 2. Engage transplant candidates, recipients and donors to advise ASTS leadership.
  - Identify innovative strategies to increase living donation for kidney and liver transplantation.
  - Incorporate the patient voice into ASTS research agenda and advocacy goals.
  - Become the leading source of information on transplant care for patients and media.
- 3. Actively engage key stakeholders to ensure that ASTS members and their programs can develop and evaluate innovative technology & therapies.
  - Advocate to reform regulatory frameworks to ensure that quality improvement and innovative practices do
    not negatively impact program performance metrics (SRTR reports, Centers of Excellence, MPSC, etc.) and
    are legally protected.
  - Create a structure of sharing of data to improve quality and collaborative innovation.
  - Expand cross institutional collaboration and learning/mentorship opportunities.
  - Create opportunities to foster and promote emerging transplant specialties.
- 4. Expand Hands-on and virtual education opportunities focused on novel treatments and emerging therapies.
  - Incorporate more video, go-pro style training, and virtual reality (VR).
  - Facilitate the presentation of interesting cases outside of traditional annual meeting opportunities.

## **LIFELONG LEARNING**

#### LIFELONG LEARNING

ASTS will be the national leader in educating transplant surgery teams through member connectivity, mentorship, and knowledge exchange.

- 1. Create mentorship programs for the education continuum for both surgeons and APPs, increase opportunities for technical training, strengthen partnership with other organizations, and disseminate knowledge among members.
  - Create a mentorship program that serves all ASTS members.
  - Foster connection, exchange of wisdom/experience and new/best practices among members.
- 2. Expand a variety of learning methods for ASTS surgeon and advanced practice provider members.
  - Create on-demand education for new knowledge.
  - Create forums to discuss new knowledge within AJT.
  - Create pathways to certification for new techniques/procedures.
  - Create surgical oriented material.
  - Establish guidelines with white papers concerning important issues to ASTS membership.
  - Create course week for surgical skills courses.
  - Expand the educational venues for teaching surgical techniques & procedures.

## **MEMBER ENGAGEMENT**

## **Member Engagement & Committee Alignment**

ASTS leadership is committed to utilizing the experience of membership to support the efforts of the strategic plan. Below is a list of current committees, task forces, and strike forces that align with our strategic goals. It is anticipated that new groups may be added and others sunset, as the work of these groups will change as our goals are met.

## **Training & Certification**

- TACC
- Curriculum Cmte
- Fellowship Training Cmte
- Pipeline TF
- Surgical Skills TF

#### Research

- Donor Research Policy and Advocacy TF
- Grants Review Cmte
- Scientific Studies Advisory Cmte
- Surgeon Scientist TF
- Cell Transplant Advisory Cmte
- Thoracic Cmte

### **Advocacy & Patient Care**

- Diversity Equity and Inclusion
- Leg/Reg Cmte
- Liver Oncology TF
- Pediatrics Cmte
- ACS Liaison
- AMA Liaison
- OPTN/UNOS Liaison
- The Alliance Liaison

#### **Innovation**

- Standards & Quality Cmte
- NSQIP Transplant TF
- Organ Recovery Collaborative Network TF
- COVID-19 SF
- Living Donation Cmte
- VCA Advisory Cmte
- Transplant Therapeutics Consortium Liaison

## **Lifelong Learning**

- ATC Planning Cmte
- ATP Cmte
- Business Practice Services Cmte
- CME Cmte
- Vanguard Cmte
- Wellness Cmte
- ABS Liaison

## **Organizational Excellence**

- Communications Cmte
- Council
- Finance Cmte
- Foundation
- International Relations Cmte
- Membership & Workforce Cmte
- Nominating Cmte
- Bylaws Advisory Cmte
- Ethics Advisory Cmte

## **ASTS Strategic Plan - Training and Certification**

**Vision for Training and Certification:** ASTS will attract and support a diverse continuum of potential transplant surgeons and providers as they enter the field of transplantation.

## Strategic Goal #1: Pipeline

**Vision:** ASTS will attract outstanding students, surgical residents, and advanced practice providers to the field of transplant surgery.

**Strategy**: Establish a robust pipeline of students and surgical residents through proactive and purposeful engagement.

Objective 1: Connect with undergraduate premedical societies and premedical counselors to create opportunities for undergraduate students.

Tactic 1.1: Create clinical shadowing opportunities including the OR, outpatient clinic, and inpatient rounding for carefully selected (competitive process) students.

- Objective 2: Align with medical schools to create a transplant surgery pipeline from medical school to transplant surgery fellowship.
  - Tactic 2.1: Work with medical school deans and general surgery clerkship directors to encourage student exposure to transplant surgery and organ procurement within general surgery clerkship rotations.
- Objective 3: Develop outreach strategies to market transplant surgery to medical students, residents, and advanced practice providers.
  - Tactic 3.1: Align with and ensure outreach to a diverse group of associations such as American College of Surgeons, Association for Academic Surgery, Association of Program Directors in Surgery, Resident and Associate Society of the American College of Surgeons (RAS-ACS), Student National Medical Association, American Academy of Physician Assistants (AAPA), American Association of Nurse Practitioners (AANP) to host ASTS-sponsored sessions at national meetings for medical students, PA-C/NP students, and residents.
  - Tactic 3.2: Emphasize non-financial rewards of becoming a transplant surgeon or provider through patient and practitioner stories.
  - Tactic 3.3: Expand support for trainees to attend the Winter Symposium and expand trainee and advanced practice provider specific sessions.
- Objective 4: Develop transplant research opportunities for students, residents, and trainees.
   Expand opportunities to present their work at ASTS Winter Symposium.
- Objective 5: Re-establish transplant surgery as a core requirement of general surgery residency.
  - Tactic 5.1: Work with residency program directors to assure optimal early exposure to transplant surgery for general surgery residents. Leverage unique opportunities for residents in transplantation, including large number of open surgeries and organ procurements.
- Objective 6: Learn the best practices from centers with strong pipelines.
  - Tactic 6.1: Identify which residencies produce the highest number of fellow applicants.

- Tactic 6.2: Identify and create a template of best practices for the pipeline during an online forum/webinar. Ask programs to develop a video with their best practices to distribute to other programs.
- Tactic 6.3: Expand the scope of activities for fellowship training program directors to include a pipeline component.

## Strategic Goal #2: Fellowship

**Vision**: ASTS will be the global leader in transplant surgery training.

**Strategy**: ASTS and TACC will refine fellowship program accreditation standards and training opportunities.

- Objective 1: Optimize the standards for accreditation for transplant surgery training programs to include non-volume criteria and professional development requirements.
- Objective 2: Conduct regularly scheduled surveys of fellows to allow the TACC to assess training program performance.
  - Tactic 2.1: Surveys will be collected every 6 months and at the end of fellowship. The TACC will use these surveys to assess the performance of training programs for reaccreditation. All fellows must submit the surveys for program reaccreditation.
- Objective 3: Formalize the program accreditation requirements for FIST track/4+2 training models.
- Objective 4: Establish career development curricula for fellows within the Academic Universe and at ASTS meetings
  - Tactic 4.1: Create session track labelling (resident, fellows, etc. tracks) in curricula and meeting program materials to assist in planning for meeting attendance, with no implications that one is limited to a single track.
- Objective 5: Further develop and implement the TACC Certification pathways.
  - Tactic 5.1: Provide an oral exam template to Fellowship Training Program Directors to guide them in conducting mock orals for fellows while in training.
- Objective 6: Establish international fellowship training opportunities or exchange opportunities.
  - Tactic 6.1: Establish international program accreditation guidelines
  - o Tactic 6.2: Supporting ASTS fellows in exchange opportunities

#### Strategic Goal #3: Transition to Faculty

**Vision:** ASTS will facilitate the transition from fellowship to faculty and foster early career faculty development.

**Strategy**: Develop strategies to ease the transition from fellowship to faculty and establish programs to support early career faculty development.

- Objective 1: Increase transparency in the job field during the job search process.
  - Tactic 1.1: Encourage use of the ASTS Career Center and other resources.
  - Tactic 1.2: Better inform finishing fellows securing their first faculty position by providing fellows the ASTS compensation survey and informational packet about understanding job offers, contracts, and benefits.

- Tactic 1.3: Evaluate the job opportunities available for transplant surgeons by conducting a workforce survey and present it to the Council every five years.
- Objective 2: Task the Surgical Skills Task Force/Hands-on Task Force with developing additional surgical skills training courses.
  - Tactic 2.1: Expand surgical skills training courses to include robotic surgery, living donor liver, and organ perfusion.
- Objective 3: Develop more career development focused content at ASTS meetings.
  - Tactic 3.1: Inform fellows and junior faculty of the various job pathways (research, quality, administrators, teaching/training).
  - Tactic: 3.2: Include programming time during ASTS events for career narratives from surgeons who have accomplished their goals, what they've learned from their failures, and how they started in their career. Encourage oral and written narratives for circulation.
  - Tactic 3.3: Facilitate additional networking opportunities during ASTS events for fellows and junior faculty.
- Objective 4: Develop a formal mentorship program for members who are 1-5 years out of training.
  - Tactic 4.1: Recruit interested mentors and mentees based on primary clinical and academic interests.
  - Tactic 4.2: Create a faculty development program for surgeons interested in refining their mentorship skills. Each mentorship group should understand the mission and purpose of this program.
- Objective 5: Promote wellness among early career faculty.
  - Tactic 5.1: Implement wellness support program by the ASTS Peer Support Network such as designated check-ins for new faculty by Network members
  - Tactic 5.2: Foster wellness by promoting ASTS Wellness Committee-sponsored events such as wellness programming at the Winter Symposium on moral injury in transplant surgical practice.
  - Tactic 5.3: Advocate for infrastructure recommendations at the institution level to promote wellness and joy at work.
  - Tactic 5.4: Create an assessment tool to understand what wellness resources are available for early faculty at their institution and how widespread the issues are.

## **ASTS Strategic Plan – Research**

Vision for Research: ASTS will advance transplant research by promoting a robust transplant scientist workforce through provision of educational, mentorship, funding, recognition, and networking opportunities and through advocacy on a national level.

## Strategic Goal #1: Funding

## Strategy

- Communicate the value and current status of the surgeon-scientist workforce and the ASTS strategic plan, including resource allocation, to promote expansion and success of this workforce over the next decade
- Increase funding efforts through the Foundation
- Focus on increasing junior faculty level funding
- Collect outcomes of previous grants recipients & identify successful track records and barriers to continued/sustained research funding
- ➤ Enhance awareness of sources of research funding opportunities

## Objectives:

- 1: Publish an ASTS transplant scientist value statement and research strategic plan
- > 2. Work with the Foundation to develop a financial target for research funding
  - What area to increase funding? Innovation? How much more \$? What areas are important but underfunded?
- 3: Increase applications and develop a database to track the number, subject matter and PI demographics for applications year-to-year
- ➤ 4: Develop sponsorship funding opportunities that reflect emerging high impact topics and include the research subject matter (content area) of the PI applicant database
- Allocate ASTS foundation funds for select research topics that are unlikely to be funded by other sponsors.
- > 5: Analyze barriers to continued/sustained research funding and develop initiatives to overcome identified barriers.
- ➢ 6: Produce an annual ASTS Research Funding Report that captures return on research investment (training, mentoring, funding etc)
- > 7: Maintain an ASTS Grants database that tracks long-term return on research investment
- 8: Enhance communication to the membership about research funding opportunities and new transplant related request for applications (RFAs)
- ➤ Host grant writing seminar virtual or at ASTS meeting

## Strategic Goal #2: Diversity

#### Strategy

- Increase the diversity of individuals who are applying for transplant research funding
- Increase funding for transplant health disparities research

## **Objectives:**

- ➤ 1: Increase representation/diversity in applicants
- ➤ Enhance awareness of supplemental funding for minority trainees on NIH grants
- 2: Create a system/database to track diversity of PI applicants
- > 3: Partner with other societies (ACS, AAS, AWS, SBAS, LSS)

## Strategic Goal #3: Advocacy and NIH Funding

## Strategy

Work with NIH, other government agencies and national organizations to stimulate the development of initiatives and policies that support a robust transplant scientist workforce

## **Objectives:**

- ➤ 1: Increase surgeon-scientist representation in NIH study sections
- 2: Work with NIH and other government agencies to promote transplant collaborative workgroups
- > 3: Increase opportunities for surgeon-scientist career development awards for surgery residents such as "stimulation of research in residency" R38/K38 STaRR awards
- ➤ 4: Establish partnership with American College of Surgeons to establish a pre-K award ACS/NIH mechanism for transplant surgeon-scientists
- > 5: Partner with NIH to provide education for training grant and career development award study section administrative staff and reviewers on the surgeon-scientist education and training path
- ➤ 6: Partner with NIH leadership and the NIH Division of Biomedical Research Workforce to designate codes for PIs who are surgery trainees or surgeons to permit longitudinal tracking of surgeon applicants/awardees of career development grants, training grants and research grants.

#### Strategic Goal #4: Pipeline/Mentorship

## Strategy

- Develop ASTS technology facilitated infrastructure to connect research mentor/mentee individuals across diverse programs
- Increase the pipeline and diversity of surgeon-scientists through targeted research programming at annual meetings and virtual programming throughout the year.
- > Seize the opportunity to leverage early investments in promising surgeon scientist to ensure they transition to a sustainable research career
- Provide mentorship, education and training that stimulates innovation and successful research grant applications to diverse research sponsors (NIH, national organizations, industry etc)
- Enhance the quality of written grant reviews to PIs of unfunded grant applications and strategic outreach to top scoring applicants

## **Objectives:**

- > 1: Develop programs for trainees
- ➤ Increase awareness of t32/35 training grants
- ➤ 2: Enhance junior faculty research opportunities through grant funding that facilitates access to research infrastructure (e.g. CTSA and other institutional centers) at host or mentor institutions.
- > 3: Identify promising surgeon-scientist junior faculty and pair them with a career development oversight committee comprised of senior surgeon scientist faculty
- ➤ 4: Track the longitudinal outcomes of promising early career surgeon scientist junior faculty
- > 5: Enhance recognition, communication and celebration of surgeon-scientist successes

## **ASTS Strategic Plan Advocacy Work Group**

**Strategic Goal #1**: Expand our leadership position in developing and implementing public policy that advances transplantation.

- **Vision for Public Policy:** ASTS will be viewed as the leader in identification, development, and implementation of policy initiatives important to the transplant community as a whole.
- **Strategy:** ASTS will continue to maintain and build a robust public policy agenda, inspired by dedication to serving patients, and will further cultivate relationships within the transplant community in service of the advancement of the following objectives.

<u>Objective 1:</u> Solicit advocacy priorities from ASTS committees, ASTS Council, and other transplant community partners and strengthen and build relationships with governmental political and administrative figures to realize our priority goals.

- Tactic 1.1: Advance an ecosystem that fosters and supports innovation in scientific medical research and development for organ donation and transplantation.
- Tactic 1.2: Advocate for reform of the regulatory frameworks to ensure that innovative practices do not negatively impact program performance metrics (SRTR reports, Centers of Excellence, OPTN, etc).
- Tactic 1.3: Build awareness and incentivization of transplantation as a whole.
- Tactic 1.4: Promote financial support of the transplant process (patient coverage and health care cost reimbursement, such as CMS carve outs for expensive therapies currently bundled with DRG's).
- Tactic 1.5: Align all advocacy efforts with diversity, equity, and inclusion initiatives to assure equity and iustice in transplant care and coordinate efforts and priorities with the ASTS DEI Committee agenda.

Objective 2: Search out new, and strengthen current, alliances that support the transplant community and our Society.

- Tactic 2.1: Forge partnerships with transplant patient advocates and patient groups representing all members of the population and all segments of care along the transplant spectrum. These relationships shall grow and evolve with our joint policy and advocacy goals.
- Tactic 2.2: Identify and effectively partner with politically empowered transplant champions
   (legislators, regulatory body officers, etc.) willing to help build and sustain community, state, and

federal support for transplant community goals. These efforts will specifically seek to partner with transplant champions of diverse backgrounds representative of the diverse patient populations we serve and will be respectful of the unique challenges these vulnerable populations face. Develop more vibrant senior administrative relationships with governmental organizations possessing direct or indirect transplantation oversight functions (UNOS/OPTN, CMS, HRSA, FDA, NIH).

- Tactic 2.3: Maintain and strengthen traditional alliances with other provider, advocacy, and professional groups within the transplant space (AST, AOPO, NKF, etc.) while increasing our focus on diversity, equity and inclusion by partnering with minority patient advocacy groups (Example: AMAT).
  - Add Dr. Gaber statement Expand interactions with UNOS/OPTN, AMA, and ACS and identify ASTS members that serve these organizations and have regular interactions/communications to better utilize their expertise in shaping and directing policy. Request reports from and meet with these representatives periodically.
    - Change the ASTS/OPTN board representative job description require all ASTS members to report to that representative on new and ongoing projects/proposals. Allocate staff time to support the representative in this role.
- Tactic 2.4: Create a new "Transplant Round Table" consisting of a diverse group of community stakeholders. The goal of this group will be to foster understanding, diversity, equity, inclusion and advance common goals through more frequent and predictable communication and joint advocacy efforts. (Note: ASTS Legislative & Regulatory Committee would participate with Powers Law in re-constituting this body.)
- Tactic 2.5: Build and maintain an ongoing relationship with transplant program administrators, and codify those relationships with underlying administrative structure, who share our goals and can lend their unique perspectives to challenges faced by our community.

Objective 3: Establish a repository of ASTS members to champion the Society's public policy agenda. (Example: ASTS members, ASTS fellows, younger people interested in a career in transplantation.) Establish guidelines to ensure this repository is diverse and representative of our patients.

- Tactic 3.1: Establish a pipeline to recruit members, fellows, associate members, and others interested in public policy and advocacy with targeted outreach. (Ex. ASTS Legislative and Regulatory Health Policy Fellow would solicit fellows to join advocacy events where appropriate).
- o Tactic 3.2: Develop public policy and advocacy training resources for interested stakeholders.
- Tactic 3.3: Create and maintain a database of those who have identified a willingness to help, and their areas of interest/expertise.
  - members
  - trainees
  - patients / families
  - other transplant community members

o Tactic 3.4: Establish an advisory panel of patients to join members in advocacy day events.

## **Strategic Goal #2**: Highlight ASTS's leadership in transplantation advocacy.

- **Vision for ASTS as an Advocacy Leader:** ASTS shall continue to be recognized as the lead provider of the most informed, current, and timely responses to transplant related advocacy and regulatory issues.
- **Strategy:** ASTS will utilize multiple platforms and approaches to educate government officials, community stakeholders, and patients, as well as its membership, about the latest transplant advocacy issues.

Objective 1: Develop a media and branding campaign showcasing the Society's policy and advocacy efforts. Promote ASTS as the transplant community's most well-informed, representative, and effective voice.

- Tactic 1.1: Study and explore best practices to operationalize a public relations campaign.
- Tactic 1.2: Redesign the existing advocacy webpage and provide a tool/platform by which members can easily connect with other members and willing participants (such as a simple web link).
- Tactic 1.3: Establish a resource center on the revised advocacy webpage that provides background and highlights of current issues.
- Tactic 1.4: Send a monthly ASTS newsletter to Members of Congress and regulatory officials which will inform them of issues of common interest and welcome their collaboration.
- Tactic 1.5: Develop media relations. Consistently reach out to medical journalists on major national and regional programs (e.g. NPR, network news) and provide content for them to use in their reporting. This will establish ASTS as a primary background content source for transplant related stories.

#### Objective 2: Attract member interest in issues.

- Tactic 2.1: Send personalized communications to Society members from the President or Legislative/Regulatory Committee Chair (rather than a generic email) to better raise awareness and motivate interest in issues important to the Society.
- Tactic 2.2: Encourage members to share advocacy related issues and/or challenges unique to their states and provide a mechanism for guidance or input from ASTS leadership.
- Tactic 2.3: Create greater opportunities for member participation and commitment.
  - Tactic 2.3.1: We suggest an addition to the current Legislative/Regulatory Committee
    footprint such that the Committee develops a hierarchical structure, based either on
    geography, or on issue categories. These Leg/Reg Subcommittees would each float a
    member to sit on the top level Leg/Reg Committee, who would then follow the current
    reporting structure. This would allow for more engagement of ASTS membership in this

work and would add to the number of people the Society can count on to carry out this work on their behalf. Two possible organizational strategies follow:

- Tactic 2.3.1.a: Organize Leg/Reg Subcommittees based on UNOS regions. This is conceptually easy and leverages pre-existing relationships (these people would tend to already know each other from regional meetings, which could spur more effective/efficient workflow). 11 regional Leg/Reg Subcommittees would each have a representative on the top level Leg/Reg Committee.
  - ◆ It may be that there is too great a disparity in the number of ASTS members in one region versus another. This would not serve the goal of equal access for the membership to these volunteer positions. Therefore, we could develop a system of contiguous geographic areas (blocks of states) that served two purposes:
    - Each area has roughly the same number of ASTS members
    - There are few enough areas to make the resulting representation on the top level Reg/Leg Committee a manageable group
- Tactic 2.3.1.b: Organize Leg/Reg Subcommittees by issue, rather than geography. This requires more thought in its development but offers the potential advantage of increasing member commitment because they would be signing up for subject matter about which they felt especially passionate. As above, each Subcommittee would then have a member sit on the main Leg/Reg body. Potential Subcommittees could include:
  - Organ donation/allocation (focus on intersecting and diverging interests with AOPO, on government regulation in this area, etc.)
  - Patient access to transplantation (e.g., health care cost containment/coverage)
  - ♦ Research and development support (focus on industry, FDA, etc.)
  - ♦ (and so forth...)
- Tactic 2.3.2: There are a number of additional ways to encourage member engagement:
  - o contributing of personal stories to the website
  - Increased encouragement to contact congressional representatives (facilitated by an ASTS online contact platform)
  - o making a one-time "ear-marked" donation to support the Society's work around a specific cause
  - o sign-on letters
  - o submission of public testimony or comment

## **ASTS Strategic Plan – Innovation**

## Strategic Goal #1: Encourage Innovation in Transplantation

**Vision for Strategic Goal #1:** Since its founding, ASTS members have developed the scientific foundation, clinical techniques, and technological solutions to organ transplantation and preservation. To continue to advance the science and practice of transplant surgery, ASTS will foster and support the development and implementation of novel technologies to enhance organ recovery, transplantation, and patient care.

**Strategy –** Partner with ASTS member/investigators to develop, pilot, and deploy new technologies, and techniques in collaboration with key strategic partners.

**Objective 1**: Improve effectiveness, efficiency, and safety in organ recovery practices: Organ Recovery Collaborative Network (ORCN)

- Tactic 1.1: Expand the ASTS website contact information/mobile access to improve communication between members to facilitate local recovery of extrarenal organs
- Tactic 1.2: Partner with OPOs to improve ASIN network to ensure consistent national standards for certification of organ recovery surgeons
- Tactic 1.3: Promulgate organ recovery performance standards and quality feedback
- Tactic 1.4: Evaluate the feasibility of developing a national organ transportation system which addresses transplant specific issues. Potential partnership and revenue generation
- **Objective 2:** Establish an innovation community within the ASTS to support members seeking clinical applications for novel approaches to organ preservation, resuscitation, transportation, and transplantation care
  - Tactic 2.1: Develop interest groups focused on innovation for ASTS members and mentorship opportunities for junior members
  - Tactic 2.2: Create a virtual ASTS innovation Incubator
    - Tactic 2.2.1 Include ASTS members and collaborators (e.g. engineers, software designers, pharmacists)
    - Tactic 2.2.2. Provide opportunities for interactions between members of potential strategic investment partners
    - Tactic 2.2.3 Develop focused opportunities to discuss innovation at the Winter Symposium and via quarterly zoom calls.
  - Tactic 2.3: Expand the ASTS LDP program/Bootcamps to include sessions on innovation, entrepreneurship, technology transfer

Tactic 2.4 Establish an ASTS developed and approved data transfer protocol that includes both clinical recipient and donor data that can be used for machine learning and other national collaborative activities. This could include an expanded version of OMOP protocols.

**Objective 3:** Promote ASTS as the primary source for of information on technology innovations in transplant care for industry and government

- Tactic 3.1: Expand the ASTS membership directory data collection to include searchable fields for expertise in innovation and entrepreneurship which can be accessed through the national office in response to inquiries for specific knowledge
- Tactic 3.2: Utilize the current hands-on course platform to educate fellows and ASTS members on new technology (e.g. robotics)
- Tactic 3.3: Utilize ASTS social media, journals, and communication tools (e.g. Chimera) to promote innovative work developed by ASTS members and trainees
- Tactic 3.4: Collaborate with key technology partners (e.g. perfusion devices) to offer educational programs for ASTS members

## Strategic Goal #2: Expand Patient Focus in Technology Development

Vision for Strategic Goal #2: Incorporate the patient voice technology development

Strategy: Establish a patient/donor advisory panel to advise ASTS leadership on patient concerns

Objective 1: Identify innovative strategies to increase living donation for kidney and liver transplantation

- Tactic 1.1: Support initiatives that achieve financial neutrality for living donors including new funding sources for living donor financial assistance, and elimination of means-testing as a qualification for support
- Tactic 1.2: Support donation safety/research through collaboration with the SRTR and other interested parties to study long term patient and organ function outcomes

Objective 2: Incorporate the patient voice into ASTS research agenda and advocacy

- Tactic 2.1: Consider incorporating patient/donor representatives on key ASTS committees
- Tactic 2.2: Include a patient/donor panel at all ASTS meetings. Starting with members of the society who are both patients and surgeons
- Tactic 2.3: Encourage members to nominate patients, living donors, and donor families to UNOS committees and other public policy forums

Objective 3: Become the leading source of information on transplant care for patients and media

- Tactic 3.1: Sponsor and distribute ASTS labeled educational videos on key transplant topics for patients and media
- Tactic 3.2: Engage traditional media and social media consultants to optimize ASTS presence
- Tactic 3.3: Develop training for members on media relations and then promote trained ASTS members to address media inquiries.

## Strategic Goal #3: Advocate for a transplant ecosystem that fosters and supports Innovation in transplantation

**Vision:** Nurture and support innovation through regulatory reform, ASTS peer to peer mentorship and support, improved educational exposure

**Strategy**: Actively engage key stakeholders to ensure that ASTS members and their programs can develop and evaluate innovative technology without fear of loss of referral or regulatory citation

- **Objective 1:** Advocate to reform regulatory frameworks to ensure that quality improvement and innovative practices do not negatively impact program performance metrics (SRTR reports, Centers of Excellence, MPSC, etc.) and are legally protected
- Objective 2: Create a structure of sharing of data to improve quality and innovate collaboratively
  - Tactic 2.1: Monitored, member only, list serve for sharing of novel ideas
  - Tactic 2.2: Interest groups at ASTS meetings and virtually throughout the year
  - Tactic 2.3: Explore options including ACS/Transplant NSQIP or a Peer Review Organization (PRO) to facilitate data exchange and quality improvement. Long term potential goal but will require substantial investment.
- **Objective 3:** Expand cross institutional collaboration and learning/mentorship opportunities
  - Tactic 3.1: Create "internship" opportunities for junior members at ASTS partner organizations; including the Transplant Therapeutics Consortium (TTC), big pharma, and tech
  - Tactic 3.2: ASTS member directory to capture a searchable list research and innovation interests and activities of members
- Objective 4: Disseminate new information to members on a regular basis
  - Tactic 4.1: Create opportunities for members to discuss/promote innovative ideas through the ASTS platform
  - Tactic 4.2: Use ASTS social media to disseminate new ideas

Tactic 4.3: Explore new media strategies to share information with ASTS members

## **Objective 5:** Facilitate ASTS member innovation

- Tactic 5.1: Create innovations "grants" (investments) cosponsored by ASTS Foundation as Angel/Early-Stage investor funding with the potential for revenue to the society for innovations that result in commercially successful idea
- Tactic 5.2: ASTS Technology incubator for members funded with the Innovation Grant that includes Senior Member mentorship access to ASTS membership for potential clinical collaboration (e.g. TTC-members)
- Tactic 5.3: Develop ASTS Technology Transfer Expert Repository (e.g. legal advice, patent strategy, regulatory filing, etc.) Leverage experience from other member projects (Technology incubator)
- **Objective 6:** Create opportunities for novel VCA transplant procedures and for science development with paired specialties

## Strategic Goal #4: Incorporate cutting edge technology into training

Vision: Encourage the latest technology advancements in training

**Strategy**: Expand Hands-on and virtual education opportunities

Objective 1: Incorporate more video, go-pro style training, VR

- Tactic 1.1: Create video mentoring opportunities
- Tactic 1.2: Have fellows record/live stream their operations for critique
- Tactic 1.3: Innovate in our assessment of workforce (e.g. fellows, NPs, PAs) needs
- Objective 2: Facilitate the presentation of interesting cases outside of normal annual meeting opportunities
  - Tactic 2.1: Closed Facebook groups, virtual case conference
  - Tactic 2.2: Trainee centered "meet the expert" sessions as it relates to emerging technology
  - Tactic 2.3: Create opportunities for industry sponsorship of collaboration platforms/session (virtual incubator) for new ideas

## **ASTS Strategic Plan – Lifelong Learning**

## Strategic Goal #1: Mentorship

**Vision for Mentorship:** ASTS will be the recognized national leader in mentorship for transplant surgery teams.

**Strategy –** ASTS will create mentorship programs for all post-fellowship career stages for both surgeons and APPs, increase opportunities for technical training, strengthen partnership with other organizations, and work to better disseminate knowledge among members (surgeons, APPs).

Objective 1: Create a mentorship program that serves all post-fellowship ASTS members

Tactic 1.1: Create small groups around topics (e.g., financial, administrative, academic, technical, women/minorities in transplant surgery, research/grants)

Tactic 1.2: Create a directory of members willing to serve as mentors and the areas in which they are willing to mentor

Objective 2: Foster connection and exchange of wisdom/experience among members interested in that topic.

Tactic 2.1: Create follow-up groups/activities after surgical skills workshops

**Objective 3:** Disseminate new/best practices, facilitate question-and-answer sessions

Tactic 3.1: Create visiting program

Objectives: Assist low-volume centers, disseminate new or innovative practices

### Strategic Goal #2: Exchange of knowledge and emerging surgical techniques

**Vision:** New knowledge is easily disseminated among ASTS members (surgeons, APPs)

Strategy: Provide a variety of methods for ASTS members (surgeons, APPs) to learn about new knowledge

**Objective 1:** Create on-demand education for new knowledge

Tactic 1.1: Create a repository of invited lectures (having Council representation)

Objective 2: Create forums to discuss new knowledge within AJT

Tactic 2.1: Create an ASTS journal club

**Objective 3:** Create pathways to certification for new techniques/procedures

- Tactic 3.1: Identify techniques in which certification would be useful/desirable to various groups
- a. Create a group to identify new technologies, with representatives from all post-training levels
- b. Winter Symposium session on emerging techniques (e.g., robotics, endovascular, bariatrics)
  - Tactic 3.2: Design ways for members to be trained
  - Tactic 3.3: Create a knowledge assessment mechanism or other pathway to certification
  - Tactic 3.4: Design a mechanism for maintenance of skills/certification and mentoring
- Tactic 3.5: Design mechanisms for maintenance of certification consistent with ABS (or equivalent) requirements (to align with TACC)
- Objective 4: Create guidelines with white papers
  - Tactic 4.1: Identify topics for which guidelines would be useful/desirable
  - Tactic 4.2: Identify authors
- Objective 5: Create course week for surgical skills courses
- Tactic 5.1: Identify techniques for surgical skills courses (e.g., pancreas procurement and back table, split liver)
  - Tactic 5.2: Consider use of 3-D models (e.g., RHD model) in course design
- **Objective 6**: Create educational outlets for essential knowledge
  - Tactic 6.1: In-person events prioritized (e.g., local, regional, national)
- Tactic 6.2: Virtual education (e.g., webinars, courses, podcasts, ASTS Universe platform, etc.) for evolving knowledge (e.g., immunology, quality & process improvement, scientific, and clinical practice)
  - Tactic 6.2.1: Transplant pharmacology CME for APP (requirement for APP accreditation)

**Operationalize:** ASTS RFP to create courses for the top topics of interest annually as determined by ASTS council (e.g., pancreas backtable course)

#### Strategic Goal #3: Connectivity

**Vision:** ASTS members (surgeons, APPs) will feel connected to each other and able to contact their peers easily

**Strategy**: Provide methods of real-time exchange with peers

Objective 1: Facilitate easy/immediate contact between members

Tactic 1.1: implement year-round app to connect ASTS members during and outside of meetings

Tactic 1.2: Hold smaller meetings in various regions

Objective 2: Keep members apprised of Society activities

Tactic 2.1: Hold ASTS sessions adjacent to UNOS regional meetings