

**OPTN Executive Committee
Regional Nominations Workgroup
Meeting Summary
February 7, 2022
Conference Call**

Edward Hollinger, Chair

Introduction

The OPTN Regional Nominations Workgroup (the Workgroup) group met via Citrix GoToMeeting teleconference on 02/07/22 to discuss the following agenda items:

1. Overview of regional nominations process
2. Discussion

The following is a summary of the Workgroup's discussions.

1. Overview of regional nominations process

The Workgroup reviewed the current state of the regional nomination process.

Summary of discussion:

There was no discussion.

2. Discussion

The Workgroup began discussions on improving regional nominations consistency across regions.

Summary of discussion:

Members agreed that there should be more consistency in the composition and processes of regional nominating committees (RNC) across regions. A member noted that although it can be challenging to fill the patient/donor role, this group should be represented on the RNCs across all regions. This member added that membership on RNCs should be either by appointment or election and that this process should not vary from region to region. A member suggested that the RNCs should be made up of a small number of members who know the process well. This member recommended the Workgroup avoid elections, as they can become popularity contests and instead focus on identifying the most qualified individuals. They voiced support for a more structured method for regularly involving representatives from each institution across each region. Members agreed that RNCs should be small, but include the current councillor, associate councillor, immediate past councilor, and OPO representation.

A member pointed out that the patient experience may be limited to personnel at the hospital where they were transplanted and that this could present as a challenge for the RNC patient/donor representative role. The member suggested that patient representatives who have more experience with the OPTN, particularly those who served on the Board, may be more familiar with people beyond their own transplant hospital and could be good candidates for the RNC. The Workgroup agreed that it is important to have a patient representative on the RNC if there is a vacancy for a patient and donor affairs representative on a committee.

Another member noted that in their region does attempt to operate on a rotation for sourcing representation, but because their region does not have as many centers as other regions, there is often a limited number of individuals with the amount of experience required to serve. A member added that the connection between MPSC membership and the regional associate councillor role should be clarified, as many people are interested in serving on the MPSC but are not willing to commit to the associate councillor role and following councillor term. A member supported retaining the committee needs assessment and volunteer interest form processes in addition to a 3 year service term.

Next steps:

The Workgroup will continue discussions during a future meeting, including consideration of short-term and long-term recommendations.

Upcoming Meeting

- March 2, 2022, 2:00- 3:00 pm ET

Attendance

- **Workgroup Members**
 - Earnest Davis
 - Edward Hollinger
 - Richard Formica
 - Jeff Orlovski
 - Patrick Healy
- **HRSA Representatives**
 - Chris McLaughlin
 - Shannon Taitt
- **UNOS Staff**
 - Anna Wall
 - Brian Shepard
 - Kaitlin Swanner
 - Kelley Poff
 - Lauren Motley
 - Shelby Jones
 - Susie Sprinson
 - Terry Cullen
 - Tina Rhoades
 - Carrie Caumont