

**OPTN/UNOS Transplant Administrators Committee
Report to the Board of Directors
June 1-2, 2015
Atlanta, Georgia**

**Amy Peele, RN, Chair
James Pittman, RN, MSN, Vice Chair**

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This report reflects the work of the OPTN/UNOS Transplant Administrators Committee from October 2014 through March 2015.

Action Items

None

UNOS Projects

1. 2015/2016 UNOS Transplant Management Forum (TMF)

The 2015 Transplant Management Forum was held April 22-24 in San Diego, CA. There were 547 participants registered for the meeting, and the Committee accepted 45 abstracts. There were 52 exhibitors, 15 sponsors, 6 abstract award sponsors, and one “doing good” donation supporting the meeting. In comparison to last year, there was an increase in the number of exhibitors and the number of attendees were comparable to 2014. Even though the exhibitor fee increased, this was the largest number of exhibitors in the history of the TMF. The agenda included eight plenary sessions and three breakout session tracks on the first day and four breakout session tracks on the second day. Up to 16 nursing contact hours and 16.75 category 1 CEPTCs were offered to attendees. The Committee will review the meeting evaluations and begin planning for the 2016 TMF at their July in-person meeting. The 24th annual TMF will be held in Indianapolis, Indiana on April 4-6, 2016.

2. 2014 UNOS Staffing Survey

The annual UNOS Transplant Administrators Committee Staffing Survey examines the size and scope of each transplant program. It also identifies the type of personnel working at the center, as well as how many perform in each role. The 2014 Staffing Survey was released on the Transplant Administrators section of the UNOS Secure Enterprise website in late January. The response rates for the 2013 survey were the highest in the survey’s history at approximately 61% of programs submitting a survey. The survey once again has a deadline of June 30. The limited window of opportunity appears to incentivize programs to submit surveys in a timely manner. Also continuing with last year’s methodology, we will send several reminders to submit a survey through the Transplant Pro eNewsletter, regional meetings, UNOS Transplant Management Forum, Transplant Administrator listserv messages, and UNetsm system notices. At this time, survey response levels slightly trail last year’s by approximately 40%, but are on par with most previous years. The Staffing Work Group sent a survey to non-respondents to gather information that might guide actions to increase future participation. The survey results indicated that many are still unaware of the survey or the deadline to submit. The Staffing Survey Work Group will reassess the communication strategy and make adjustments as necessary to boost the response. The survey is projected to accrue enough data to report by late May at which time the results will be released to members. The Committee at their next in-person meeting in July will discuss

what changes need to be made to the survey, if any, and creating resource tools for centers to use.

3. 2015 UNOS Request For Information

The Committee continues to explore how the UNOS Request For Information (RFI) could assist the Committee in understanding the perspectives and concerns of payers while balancing the needs of transplant centers for adequate reimbursement. The purpose of the RFI is to provide transplant centers the efficiency of entering essential organ transplant program information and data in one location for payers to review and is located within the Transplant Administrators application in UNetSM. The Work Group requested that only annual maintenance updates be made for the 2015 RFI. This effort required the dates on the forms to be updated to the current year, elimination of Heart-Lung RFI, and text changes for two questions.

During its July 2014 payer meeting, the payers requested the data in RFI forms be made available in a more user-friendly format where it could be uploaded directly into their system. UNOS staff determined the data could be exported into an excel file for the 2016 release. The TAC Payer Relations Work Group members hope this update will decrease the need for payers to require addendums to the UNOS RFI.

The TAC Payer Relations Work Group had a conference call with payers on March 24, 2015 to continue discussion about ways to eliminate payer addendums, any additional data the payers would like added to the RFI, ways to decrease duplicative data, and data that is currently included in the RFI but not used by payers. The payers did not request any specific data points be added to the RFI and were in agreement that an excel spreadsheet would be a better format than the current PDF but it's still not ideal. A "data dump" would be the most usable format. After review of the duplicative data, payers agreed they would review their addendums and remove questions that are included in the RFI. All payers also agreed to the removal of the RFI SRTR data attachments as that data is posted to the public SRTR site. The Work Group members and payers were in agreement that the RFI form (including questions and programming) needs to be updated. Payers also requested more and earlier policy education. The two groups will continue to discuss these issues via web conferences and bi-annual in person meetings.

4. Transplant Administrators Listserv

The Committee established the Transplant Administrators Listserv in 1999. A working sub-group of the TAC comprises the listserv moderators who oversee access and content of the listserv. The objective of this listserv is to facilitate the sharing of information regarding the practice of transplant operations and administration. Membership is open to transplant administrators or managers of UNOS approved (or pending approval) transplant providers within the United States. Membership is also open to employees of UNOS, HRSA, and other governmental or governmental contract agencies that participate in the management or oversight of organ transplantation. As of April 6, 2015 there are 591 listserv members with individuals requesting membership daily. Current work of the Listserv workgroup includes:

- Reviewing requests for new memberships
- Approve/decline membership requests according to listserv guidelines
- Work to develop better ways to manage archives

5. UNOS Research

The UNOS Director of Research requested the Committee's feedback on what type of data, data reports, and analytic services the research department could provide that would be

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useful for administrators. The Committee agreed a service that assisted administrators with interpreting and formatting data would be beneficial.

OPTN Committee Projects

None

Committee Projects Pending Implementation

None

Implemented Committee Projects

None

Review of Public Comment Proposals

The Committee reviewed 7 of the 28 policy proposals from September 2014 – March 2015.

6. Proposal to Implement Pre-Transplant Performance Review (Membership and Professional Standards Committee (MPSC))

The Committee received a presentation and requested clarification on several aspects of the proposal. A member raised concern that the composite score may not be representative of pre-transplant management. Another member asked if a center does not meet criteria based on the composite score and is reviewed by the MPSC, should the center expect an enforcement action after the review. Clarification was also requested on how organ acceptance data will be considered in this metric since organ acceptance decisions are often made based on narrative information that is not collected in a data field. There was also concern by a member that smaller centers in certain geographic areas might be at risk by being compared to larger centers. It was asked how the MPSC will use this metric to assist centers in making improvements in pre-transplant management performance.

7. Definition of a Transplant Hospital (Membership and Professional Standards Committee (MPSC))

The Committee reviewed and supported the proposal with no questions or concerns.

8. Proposal to Establish a Quality Assessment and Performance Improvement Requirement for Transplant Hospitals and Organ Procurement Organizations (MPSC)

The Committee received a presentation and requested clarification on several aspects of the proposal. Questions and concerns raised by committee members included:

- When the analysis was conducted to implement and require QAPI plans, what percentage of transplant programs did you find were not currently CMS approved?
- It was noted that for 85% of transplant centers there will be duplicative QAPI requirements with CMS and OPTN. With that in mind, will there be another crosswalk developed between the CMS and OPTN QAPI requirements? This will be critical because the CMS QAPI requirements are very prescriptive where the OPTN requirements are not. A crosswalk would reduce centers having to interpret the requirements for the OPTN QAPI plan.
- Did the MPSC discuss the following alternative when developing this proposal? If the OPTN found a quality issue with a program, the OPTN would file a formal complaint with CMS and CMS would have to substantiate the complaint with the center's QAPI plan.

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- Please develop a checklist and sample forms so requirements are not misinterpreted. Also, dissemination of effective practices would be helpful.
- One committee member stated this proposal is subjective. The proposal does not specifically state what situations the MPSC would require a program to provide a QAPI plan. Centers should not be required to adhere to subjective requirements. They should be specific.
- There was also concern that if CMS or the OPTN changes their requirements then each program will have to be in compliance with two different set of requirements.
- Members felt this proposal is similar to the correction plans centers have to submit. Does the MPSC not consider plans of correction and follow up from MPSC or site surveyors sufficient?

9. Policy Rewrite Parking Lot “Quick Fixes” (Policy Oversight Committee (POC))

The Committee reviewed and supported the proposal with no questions or concerns.

10. Proposal to Improve UNet Reporting of Aborted Procedures and Non-Transplanted Organs (Living Donor Committee (LDC))

The Committee had no comments or concerns regarding this proposal.

11. Clarify Policy Language and Process for Individual Wait Time Transfer (Patient Affairs Committee (PAC))

A committee member requested clarification on multi-listing wait time. The member was unsure if the candidate was multi-listed would he/she lose part of his/her wait time at center B. There was also a question of if wait-time starts with the dialysis date then how do you calculate the wait time if they multi-list?

12. Proposed ABO Blood Type Determination, Reporting, and Verification Policy Modifications (Operations & Safety Committee (OSC))

A committee member commented that it is difficult to document ABO verification to meet both CMS and OPTN regulations and requested a standardized documentation form that fulfills all the requirements that are now being outlined by this proposal.

Other Committee Work

13. Committee Feedback

Organ Procurement Organization Committee (OPO) Limit Paper Documentation Required to be Shipped with Organs

The OPO Committee requested feedback from the TAC on how to reduce the amount of paper documentation that gets packaged and shipped with organs. The main focus of the OPO Committee’s discussions is to simplify the process and only require OPOs to package and ship the essential information with each organ and allow for the remaining information to be uploaded into DonorNet®. The OPO Committee was seeking input from the transplant center community to ensure that all steps in the process are identified and addressed. For more information, see **the OPO Committee Report to the Board**.

Operations and Safety Committee (OSC) Infectious Disease Verification Work Group

The TAC has two representatives assigned to the OSC Infectious Disease Verification Work Group. These representatives provide feedback regarding possible policy development that would add requirements for infectious disease test results verification for donor and recipient

and/or time outs prior to transplanting an organ. For more information, see the **OSCs Report to the Board**.

Ethics Committee Proposed Project to Consider if Living Donor Recovery Hospitals Should Be Responsible to Provide Care for Post-Operative Complications

The Committee provided feedback on a recently proposed Ethics Committee project that would consider if living donor recovery hospitals should be responsible for providing care for post-operative complications. The Committee agreed this project should result in a white paper and not additional policy. Several committee members commented that the challenge for most centers is obtaining reimbursement for post-operative complications. It was also suggested this project re-evaluate donor follow-up data points to make sure accurate data is being collected regarding donor related complications. For more information, see the **Ethics Committee Report to the Board**.

Living Donor Committee (LDC) and Operations and Safety Committee (OSC) Potential New Requirements for the Transport of Living Donor Organs Project

This joint project is using Healthcare Failure Mode & Effect Analysis (HFMEA) to evaluate failure modes for the transport of living donor organs. Two TAC members volunteered to participate in this project and will provide progress updates to the full committee on its monthly web conferences and in person meetings. For more information, see the **LDC and OSC Reports to the Board**.

Minority Affairs Committee (MAC) Guidance on Informed Consent for Living Donors Representing Vulnerable/High Risk Populations Project

The Committee has a representative serving on a MAC Work Group that is currently working on developing a guidance document on informed consent for living donors representing vulnerable/high risk populations. The group conducted a data and literature review and drafted a guidance document that will be presented to the Board in June for approval. For more information, see the **MAC Report to the Board**.

14. OPTN Fiscal Impact

An OPTN Work Group that includes members of the TAC, OPO Committee, UNOS staff, and HRSA was formed to establish a model that will effectively evaluate the impact OPTN proposed policy changes or new policy implementation will have on transplant centers and OPOs. The TAC has four members on this working group and one of those members is the work group chair. The full committee will receive progress updates during its monthly web conferences and in person meetings.

15. ETT/TransNetSM

The Committee continues to provide feedback on the ETT/TransNetSM project. A committee member questioned if there has been any concern with putting another armband on the recipient. TransNetSM will not designate where the armband should be placed or the color of the armband. Another concern with the armband is patients will have multiple armbands and there is the possibility of it being removed. There was also concern with integrating the system across all OPOs and transplant hospitals and what the process would be if TransNetSM stopped working. It was explained that OPOs and centers would have to revert back to manual entry until the system could be fixed.

16. Educational Work Group

The TAC Education Work Group continues to provide structural and content feedback on OPTN/UNOS educational efforts and committee projects regarding policy and their impact on practice.

The Work Group also plans to work with UNOS Instructional Innovations to develop an educational needs assessment survey that will identify topics and effective educational mediums for the transplant community.

TAC Work Group members also participated in a conference call with representatives from AST Transplant Administrators CoP, The Alliance, and The National Foundation for Donation and Transplantation to discuss possible collaboration efforts. Some ideas for possible collaboration between the organizations included:

- the development of a symposium for transplant administrators at the 2016 American Transplant Congress meeting in Boston
- possible webinars that provide an understanding of policies and how proposed policies impact centers from an administrators perspective
- development of a repository of training materials to house training documents

The Work Group will discuss these ideas with UNOS Instructional Innovations and invite them to work with this group to avoid duplication of efforts.

Meeting Summaries

The committee held meetings on the following dates:

- October 16, 2014
- November 17, 2014
- January 28, 2015
- February 25, 2015
- March 25, 2015

Meetings summaries for this Committee are available on the OPTN website at:
<http://optn.transplant.hrsa.gov/converge/members/committeesDetail.asp?ID=28>.