

**OPTN/UNOS Transplant Administrators Committee (TAC)  
Meeting Summary  
March 23, 2016  
Conference Call**

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

*Discussions of the full committee on March 23, 2016 are summarized below. All committee meeting summaries are available at <http://optn.transplant.hrsa.gov/>.*

**Committee Projects**

1. None

**Committee Projects Pending Implementation**

2. None

**Implemented Committee Projects**

3. None

**Review of Public Comment Proposals**

4. None

**Other Significant Items**

5. **Request for Feedback**

The MPSC has requested feedback from the TAC on the MPSC's current concepts for updating the OPTN's transplant hospital definition. Committee members commented that the clauses, "To the satisfaction of the OPTN" and "At the discretion of the OPTN" may be too broad and may need to be better defined. Clarification of whether or not this proposal would apply to VA hospitals that are part of the Deans Committees was also requested. Feedback will be used to assist the MPSC with developing a public comment proposal for this topic.

UNOS Research and SRTR staff requested the TAC's feedback on ways to improve OPTN data integrity, timeliness of submission, and reliability of data. There is lack of trust in accuracy and completeness of OPTN data that is used for decision-making purposes. UNOS staff and SRTR staff are working on ways to address this issue. Committee members had several questions and comments for UNOS staff and SRTR to include:

- Centers have to prioritize their resources to focus on the "mandatory" data. While this is not ideal, it is an environment where centers are "constantly having to do more with fewer resources."
- It is concerning that staff do not always understand why they are entering data and view it as "completing the forms."
- The OPTN should "almost exclusively" focus on data definitions and recommend "discrete elements" with solid definitions. This came up multiple times, and also in the context of trying to find objective surrogates for future data elements being

proposed instead of collecting terms that require extensive chart review and medical assessment.

- It was suggested that any tools the OPTN could provide to assist with identifying where centers might be underreporting data (such as PVD) would be helpful.
- The validity of data elements and time point for collection were also mentioned. For example, some elements are only collected on the TCR but a candidate is likely to develop the condition (e.g. PVD) while listed.

It was decided to form a work group to continue this discussion with research, SRTR, and the OPTN/UNOS Data Advisory Committee (DAC). A separate call will be scheduled with members from the above-mentioned groups in May.

### **Upcoming Meeting**

- June 22, 2016 (Conference Call)
- July 20-21, 2016 (Chicago, IL)