

**OPTN/UNOS Executive Committee  
Meeting Summary  
January 18, 2018  
Web Conference**

**Yolanda Becker, MD, Chair**

*Discussions of the full committee on January 18, 2018 are summarized . All committee meeting summaries are available at <http://optn.transplant.hrsa.gov/> .*

**2018-2021 Strategic Plan Proposal**

The Committee reviewed the proposed 2018-2021 Strategic Plan, centered around the organization’s identified strengths in Match, Data and Quality. Top initiatives ranked by the Board were discussed, and the efficiency goal was reworded from “Promote efficient management of the OPTN” to “Promote efficiency in donation and transplant.” It was proposed that the goals and their respective resource allocation change as follows:

<b>Goal</b>	<b>Benchmark</b>
Increase the number of transplants	40%
Provide equity in access to transplants	30%
<del>Improve waitlisted patient, living donor and transplant recipient outcomes</del> Promote living donor and transplant recipient safety	<del>15%</del> 10%
<del>Promote living donor and transplant recipient safety</del> Promote efficiency in donation and transplant	10%
<del>Promote efficient management of the OPTN</del> Improve waitlisted patient, living donor and transplant recipient outcomes	<del>5%</del> 10%

The decrease in resource allocation for the outcomes goal from 15% to 10% better reflects the ability and capacity to develop policy proposals that drive outcomes improvements, as these resource benchmarks are used to allocate efforts of the committees on new projects. These proposed benchmarks also account for critical functions of the OPTN/UNOS, such as the Organ Center and IT system improvement initiatives.

A motion was made and seconded for the above goals and relative allocation benchmarks. The motion was approved by a vote of 11 for, 0 against, and 0 abstentions.

It was suggested that a basic explanation on the public site of the strengths of UNOS and how the organization interacts with others in the transplantation and donation community would be helpful. One edit suggested for the strategic plan was to include the UNOS Values at the beginning of the plan, since it should begin with the organizational mission, vision and values. A typo was also submitted for correction.

A motion was made and seconded to approve the language of the strategic plan with above edits for public comment; it was approved by a vote of 11 for, 0 against, and 0 abstentions.

The intent is that the strategic plan be implemented, with approval from the Board, in July 2018.

## **POC Recommendation for Public Comment Proposals**

Jennifer Milton, B.S.N., CCTC, M.B.A, chair of the Policy Oversight Committee, presented on behalf of the POC. After a motion was made and seconded, the Executive Committee approved distributing 12 proposals for Spring 2018 public comment by a vote of 11 for; 0 against; 0 abstentions.

- Align VCA Transplant Program Membership Requirements with Requirements of Other Solid Organ Transplant Programs (VCA)
- Informed Consent Clarification for Transmittable Conditions (DTAC)
- Extra Vessels – Reducing Reporting Burdens and Clarifying Policies (OSC)
- Hypertrophic Cardiomyopathy Restrictive Cardiomyopathy Exception Request Guidance for Review Boards (Thoracic)
- Maximum Allowable BMI for KP Waiting Time (Pancreas)
- Modification of the Lung Transplant Follow-up Form (TRF) to include CLAD (Thoracic)
- OPTN Bylaw Revisions to Appendix L (MPSC)
- Manipulation of the Waitlist Priority of the Organ Allocation System through the Escalation of Medical Therapies (Ethics)
- Update Guidance for ABO Subtyping Organ Donors for Blood Groups A and AB (OSC)
- OPO Guidance on Requested Deceased Donor Information (OPO)
- Guidance on Optimizing VCA Recovery from Deceased Donors (VCA)

Regarding the “Broader Distribution of Adult Donor Lungs” (Thoracic), the POC felt they held a token role in the review of this proposal and did not feel they should have reviewed it for public comment. They ultimately voted to recommend it for public comment by a vote of 6 for, 4 against, and 2 abstentions but had significant concerns about their involvement in the process. These feelings are exacerbated by recent concerns that the Executive Committee has rejected recommendations by the POC in the past.

Based on the vote by the POC, the Executive Committee shared concerns that members of the POC fundamentally misunderstood what instigated the proposal. Additional education to the community, including presentations for all committees, may be necessary. It would also be important to review and communicate the role of the Policy Oversight Committee during emergency policy changes. Dr. Becker offered to present additional details to the POC. Clarifications to the background materials accompanying this proposal will be made to better communicate the HHS critical comment pathway, compliance with the Final Rule, and the resulting changes.

A concern relating to “OPTN Bylaw Revisions to Appendix L” (MPSC) was voiced, asking if removing the letter of warning adverse action will result in an unintended public perception that focus is more on adverse actions, if the proposal was not read in depth.

The Executive Committee also reviewed two concept papers for public comment:

- Improving the OPTN/UNOS committee governance structure concept paper (Executive)
- Expedited Organ Placement concept paper (OPO)

The committee approved these to be distributed for public comment by a vote of 11 for; 0 against; and 0 abstentions.

## **IT Update**

On January 10, an update was released to give OPOs the ability to electronically notify a center that their candidate is the primary or backup on a match run. This idea originated in the systems optimizations workgroup and developed during a collaborative innovation event held at the

NATCO annual meeting in August 2017. To date, 34 OPOs have thus far used the feature to send out a total of 272 notifications.

On Monday, the IT Advisory Committee chair brought forth concerns regarding community awareness about the feature, and also provided feedback that the substance of the notifying call should be revisited since it sounds similar to the organ offer call. IT is considering ways to edit the message to make clear it is for primary or secondary notification. Once the change is implemented, the training module will also be updated and the audio file for the call will be included. Targeted communications will also be sent to transplant administrators to inform them of the call and its purpose.

### **Upcoming Meetings**

- February 2, 2018, 2:00-3:00 PM EST
- February 26, 2018 1:00-2:00 PM EST
- March 19, 2018 1:00-2:00 PM EST
- April 16, 2018 1:00-2:00 PM EST
- April 20, 2018 8:00 AM-12:00 PM CST
- May 14, 2018 1:00-2:00 PM EST
- June 11, 2018 Time TBD