

**OPTN Policy Oversight Committee
Local Recovery Workgroup
Meeting Summary
July 31, 2020
Conference Call**

Mike Marvin, MD, FACS, Workgroup Chair

Introduction

The Local Recovery Workgroup (the Workgroup) met via Citrix GoToMeeting teleconference on 07/31/2020 to discuss the following agenda items:

1. Recap of 6/19 Workgroup Call
2. IT Discussion: DonorNet® Enhanced Communications
3. Discussion: Project Recommendations and Next Steps

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

1. Recap of 6/19 Workgroup Call

The Workgroup reviewed the goal of the workgroup and the following project recommendations proposed during the 6/19 workgroup call:

- Communication Enhancements in DonorNet®
- OPTN Policy should consider method of procurement in expedited placement projects
- Guidance to promote consistent practices in organ recovery process
- Guidance addressing best practices in organ recovery process

Summary of discussion:

No discussion

2. IT Discussion: DonorNet Enhanced Communications

The Workgroup reviewed a potential communications enhancement idea from the United Network for Organ Sharing (UNOS) IT department.

Summary of discussion:

UNOS IT staff presented the proposed "Follow Donor" enhancement to DonorNet®. It was explained that this would allow users to self-elect to follow a case, in turn, eliminating disconnect between a user making the first call of a notification and a surgeon/decision-maker needing updates. UNOS staff identified a need for communication around OR time and OR schedules.

The below information will be received through text (SMS) message when a user elects to follow a donor:

- Cause of death information
- Recovery facility location
- Date and time of operation (tentative or scheduled)

A member stated that having a mobile app to track events in real time is an important feature. Another member mentioned that a mobile app would eliminate the difficulty of logging into a work laptop, which may require multiple passwords or multiple verification steps. It was also mentioned that having the ability to add registered nurse (RN) coordinators, or whoever is involved in setting up the transplant, to the mobile app would eliminate extra phone calls between coordinators.

A member inquired about who is updating this data and how frequently it's being updated. UNOS Research staff explained that it's an organ procurement organization (OPO) functionality, but it doesn't get updated in real time so that would need to be a workflow change if the Workgroup decides to move forward with this. A member commented that access and keeping data up-to-date is going to be critical in the success of this project.

3. Discussion: Project Recommendations and Next Steps

The Workgroup discussed their proposed recommendations and voted on which recommendations to endorse.

Communication Enhancements in DonorNet

The Workgroup reviewed the "Follow Donor" enhancement and endorsed this recommendation to the Policy Oversight Committee (POC).

OPTN should consider method of procurement in expedited placement projects

This is a policy recommendation for committees working on expedited placement projects to consider the impact of method of procurement.

A member mentioned that the main purpose of this recommendation aims to put something in policy that states centers may not be recovering their own organs and adding additional time to the allocation process if the center wants to be a part of expedited placement.

Members agreed that this recommendation is straight forward and logical to help improve local recovery.

The Workgroup endorsed this recommendation to the POC.

Guidance to promote consistent practices in the organ recovery process

The Workgroup discussed the varying practices across organizations as it pertains to local recovery. This recommendation would provide information or a checklist to standardize practices.

The Workgroup endorsed this recommendation to the POC.

Guidance addressing best practices in the organ recovery process

One example of needing guidance in best practices is when surgeons leave the operating room without the intended organ.

Members agreed that this would be beneficial to explore and improve upon. A member suggested collaboration with the American Society of Transplant Surgeons (ASTS) to gather more clinical and ethical expertise when offering guidance.

A member inquired whether this would be a change in policy or a guidance document. A member explained that this doesn't need to be answered yet because it will be resolved after the POC evaluates the recommendations.

A member questioned if this guidance is solely regarding the practice of surgeons staying in the operating room or the actual procedure itself. A member explained that it's about surgeons staying in

the operating room and providing guidance to what should be done if the surgeon from the original center doesn't receive the intended organ.

The Workgroup endorsed this recommendation to the POC.

Next Steps:

- The progress and recommendations agreed upon by the Workgroup will be reported to the POC for their review and feedback during their August 12, 2020 teleconference.

Upcoming Meeting

- August 21, 2020 (teleconference)

Attendance

- **Workgroup Members**
 - Michael Marvin
 - Alexandra Glazier
 - Jasleen Kukreja
 - Kevin O'Connor
 - Nancy Metzler
 - Nicole Turgeon
- **HRSA Representatives**
 - Robert Walsh
 - Vanessa Arriola
- **SRTR Staff**
 - Katie Audette
- **UNOS Staff**
 - Bonnie Felice
 - Craig Connors
 - Elizabeth Miller
 - James Alcorn
 - Joann White
 - John Rosendale
 - Kaitlin Swanner
 - Lauren Mauk
 - Leah Slife
 - Lloyd Board
 - Matt Prentice
 - Rebecca Brookman
 - Ross Walton
 - Shannon Edwards
 - Susan Tlusty
 - Nicole Benjamin