

**OPTN Membership and Professional Standards Committee
Membership Requirements Revision Subcommittee
Meeting Summary
March 31, 2021
Conference Call**

Clifford Miles, M.D., Chair

Introduction

The Membership Requirements Revision Subcommittee of the Membership and Professionals Standards Committee (MPSC) met via Citrix GoToTraining teleconference on March 31, 2021, to discuss the following agenda items:

1. Welcome
2. Review “Request for Feedback” - Public Comment
3. Wrap Up

The following is a summary of the Subcommittee’s discussions.

1. Welcome

A staff member welcomed the Subcommittee and reviewed the meeting agenda. She explained that the meeting objective was for the Subcommittee to review comments on the *“Request for Feedback: Update on Transplant Program Key Personnel Training and Experience”*, and to provide suggestions or ideas for revisions to the format based on public comment feedback.

2. Review “Request for Feedback” - Public Comment

The staff member reviewed the “Request for Feedback” topics and the demographic data for the comments. Two individuals, one-member transplant hospital, eleven regions, six OPTN committees, and five external stakeholder organizations submitted comments. Staff highlighted some of the key comment themes for each topic. The Subcommittee reviewed the comments and offered feedback and questions:

Consolidation of Pathways/Currency

The Subcommittee provided feedback on comments related to currency concerns for applicants in pediatric and small volume programs. The Subcommittee Chair agreed with the comments and suggested that the currency requirements be lowered to accommodate applicant’s pursuing the fellowship pathway. Other subcommittee members agreed with comments that supported the consolidation of fellowship and clinical pathways. However, one subcommittee member suggested that someone who is U.S. trained should also have some type of fellowship experience and should not be allowed to apply only with clinical experience.

Another subcommittee member reviewed a comment about leadership training for applicants using the fellowship pathway. He stated that there are currently no requirements for leadership experience in the bylaws and suggested a bi-annual leadership course to orient applicants into the role. A staff member mentioned that the OPTN orientation curriculum could incorporate leadership training. Subcommittee members also stated that it is important to remember that all fellowship programs are different and the MPSC needs to make decisions that would not further limit access or raise barriers to individuals

becoming primary surgeons or physicians. A subcommittee member suggested looking at data on programs operated under primaries that were approved straight out of fellowship.

The MPSC Vice Chair provided comments regarding currency requirements for pediatric program applicants and stated that any decisions made with adult programs would also affect pediatric programs. He noted that there are significant differences between the transplantation of teenagers vs. younger children. A staff member mentioned an example of a program who had transplanted several teenagers but did not meet the requirements for a pediatric program because they did not have enough younger transplant candidates (6 years old or younger). The MPSC Vice Chair stated that no changes should be made to the newly implemented pediatric bylaw requirements, but the MPSC could look at data on the new bylaw implementation to see if there really is a problem to address.

Exemptions for Select Requirements Primary within the Last 10 years

The Subcommittee reviewed comments about exemptions for applicants who have been a primary in the last 10 years. One subcommittee member stated that there should not be a time limit on the currency requirement. He stated that if an applicant has been a primary in the past then they should be able to be a primary again regardless of currency. Other subcommittee members stated that an applicant would need to show some kind of recent involvement in transplant. The Subcommittee reviewed a comment asking the MPSC to consider allowing applicants to use procurements for any organ type to meet the requirements, particularly for lower volume organs. The Subcommittee members agreed with this comment.

OPTN Orientation Curriculum

A staff member reported that there were several comments supporting the implementation of an OPTN orientation curriculum. The Subcommittee Chair stated that the curriculum would need to be manageable in length and have good content that would encourage members to take the course. Subcommittee members also noted that the curriculum should focus on knowledge that individuals would need to serve as a primary.

HRSA staff suggested requiring the curriculum within fellowship programs. Another subcommittee member asked about including the curriculum in AST and ASTS fellowship programs and suggested incorporating a curriculum already established by these organizations. A staff member responded that the OPTN does not have the ability to require incorporation of the curriculum into fellowship programs but would publicize the availability of the curriculum. The staff member also mentioned that the curriculum would be required for anyone who applies to be a primary. The staff member explained that the curriculum would have to be developed and owned by the OPTN, but would be available to anyone.

Conditional Pathway

The Subcommittee reviewed comments related to a proposal for a conditional pathway. One comment noted concerns with the requirement for a mentorship/consulting agreement and suggested that the mentorship should be provided by the OPTN or the MPSC, rather than a primary at another program. The Subcommittee supported this comment and suggested that the requirement could create a conflict of interest between programs. A subcommittee member also suggested that the time requirement for the agreement should be shortened. Other subcommittee member disagreed with the comments and stated that the mentorship with other primaries is a great idea. A staff member responded that the current conditional pathways in the bylaws contain this requirement with no restrictions on the location of the mentor, so mentorship/consulting could be completed virtually. Member Quality has not received a significant number of objections, if any, to the requirement for mentorship.

Logs/documentation

A staff member stated that there were many comments requesting that UNOS evaluate ways to transfer previously submitted transplant surgery and recipient logs to new applications. She also mentioned that UNOS is currently investigating ways that UNOS can assist members in developing the logs/documentation. The Subcommittee provided no further suggestions.

Foreign Equivalency

A staff member advised that there were many comments supporting a flexible option for individuals who trained or gained experience outside of the United States to qualify as a primary surgeon or physician. The Subcommittee discussed the requirements for licensing to practice in the United States for individuals with foreign training and experience. One subcommittee member noted that, in his experience, the foreign-trained individual was required to do a fellowship in the United States to practice. A subcommittee member noted that foreign-trained individuals could not get board certification. Another subcommittee member mentioned that licensing and credentialing requirements vary between states, fellowship programs and hospitals, which makes it difficult to develop detailed bylaw language that would provide flexible options and transparency. A subcommittee member provided an example of how highly qualified foreign trained individuals had been hired by their hospital but were unable to lead programs as the OPTN primary due to the bylaw key personnel requirements. Many subcommittee members also supported a pathway/mechanism to become a primary for individuals who are ineligible for board certification. One subcommittee member suggested a more detailed peer review system be implemented to review each application individually similar to the mechanisms used by some hospitals.

Other Feedback

The Subcommittee Chair provided feedback on a comment noting that hospital and department leadership, who are the hiring decision makers, are often not aware of OPTN personnel requirements. He suggested that the MPSC develop materials that transplant personnel could use to educate hospital and department leadership. He also suggested that the MPSC could develop a process that would accommodate the submission of applications for Member Quality staff review prior to final hire.

The Subcommittee members also provided suggestions for qualifying procurement surgeons by Organ Procurement Organizations (OPOs). A subcommittee member suggested the creation of guidance documents by AOPO or other OPO organizations. Another subcommittee member stated that OPOs need clear, concise criteria for procurement requirements for surgeons and stated that it is difficult to evaluate surgical competency. He also suggested considering an OPTN process/mechanism for procurement surgeon feedback for OPOs to correct internal processes. Another subcommittee member suggested a developing mechanisms to standardize a local procurement process and for pictures taken during local recovery of organs to facilitate the evaluation of the organs by the transplanting surgeons.

3. Wrap Up

The staff member thanked the Subcommittee and the Subcommittee Chair for their work and effort on the project. The Subcommittee Chair gave a closing statement. There were no other comments at this time.

Upcoming Meeting

- April 22, 2021, MPSC Meeting, 1-3pm, ET

Attendance

- **Subcommittee Members**
 - Clifford D. Miles (Subcommittee Chair)
 - Christina D. Bishop
 - Theresa M. Daly
 - Jonathan A. Fridell
 - PJ Geraghty
 - Edward F. Hollinger
 - Heung Bae Kim
 - Jon A. Kobashigawa
 - Nicole A. Pilch
 - Lisa M. Stocks
 - Parsia A. Vagefi
- **HRSA Representatives**
 - Marilyn E. Levi
 - Arjun U. Naik
 - Raelene Skerda
- **UNOS Staff**
 - Sally Aungier
 - Nicole Benjamin
 - Tameka Bland
 - Demi Emmanouil
 - Katie Favaro
 - Asia Harris
 - Ann-Marie Leary
 - Sandy Miller
 - Amy Minkler
 - Liz Robins Callahan
 - Sharon Shepherd
 - Leah Slife
 - Olivia Taylor
 - Roger Vacovsky
 - Gabe Vece
 - Marta Waris
- **Other Attendees**
 - N/A