OPTN Board of Directors Nominating Committee
Meeting Summary
June 10, 2021
Conference Call

Matthew Cooper, M.D., Chair

Introduction
The OPTN Nominating Committee, Associate Councillors, Regional Councillors, and Associate Councillors-Elect met via teleconference on 06/10/2021 to discuss the following agenda items:

1. Discussion on Recruitment, Diversity, and Community Outreach

The following is a summary of the their discussions.

1. Discussion on Recruitment, Diversity, and Community Outreach

The Nominating Committee Chair presented the Needs Assessment that will be shared with the Board of Directors (BOD) during their meeting on June 14. The Call for Nominations opened on June 1.

The breakdown of the BOD Needs Assessment shows the importance of diversity and inclusion. The Final Rule outlines a specific percentage and specific expectation of representation on the Board, including patient and donor perspective. Approximately 50% is made up of MDs traditionally split between surgeons and physicians; 25% from patients, recipients, recipient families, donor families and living donors; and 25% from all other non-transplant professionals and the general public.

The OPTN finds it purposeful, meaningful, and appropriate to increase diversity and inclusion so that the Board composes the group the OPTN is meant to represent. The demographics of the elected 2021-2022 Associate Councilors has already begun to demonstrate some enhancements to racial and ethnic diversity, but the majority is still male versus female.

Outreach efforts will begin this summer. The goal is to get more people to sign up and complete a volunteer information form to build a pipeline of applicants and find additional talent to become a part of the Board. The Nominating Committee’s help is needed with referrals to colleagues, family and friends, and patient donor representatives, as well as connections through transplant organizations and societies. Committee members are encouraged to make a personal effort through calls, emails, and in-person discussions to invite those people to consider a position on the Board or a position on one of the OPTN committees. The Committee members have tremendous influence, as the transplant community at regional meetings and others look to them as leaders.

One Committee member noted that some individuals were discouraged after not being selected for OPTN volunteer positions, and mentioned that applicants do not get any feedback as to why they were not selected, so it becomes difficult to continue to encourage them to apply.

One participant commented that 25% of the Board makeup from non-transplant professionals is usually additional physicians. This needs to be looked at more closely because it does not leave a lot of opportunity for P&DA representatives to fill Associate Councilor and Councilor positions when they go to physicians. A committee member noted that a pathway has not been developed for lay people to get to positions such as president-elect or secretary. The Committee Chair agreed that one criterion for consideration for president-elect is that the individual has served on the Membership & Professional
Standards or Policy Oversight Committees, and those typically go to Chairs, Vice Chairs, Councilors, and Associate Councilors. Therefore, it is difficult for a P&DA representative to fill those at-large positions. This is where it will be important to build a pipeline and educate the lay public to help them understand the policies and make the process smoother and more functional.

There was agreement that there have been few patient and donor affairs candidates in the Regional Councillor or Councillor roles. With the number of positions on the Board prefilled from the regions or organizations, the BOD Needs Assessment cannot be addressed without help from the regions specifically. Several comments were made about difficulty in finding OPO or patient/donor family representative for specific regions. One comment was that in Region 8, they made an effort to bring patient and donor representatives to the regional meetings, even if it was just offering transportation to the meetings. Reaching out also helped the OPOs to get to know more people and their efforts have been proven to be helpful on different levels.

An Associate Councillor mentioned that she was not aware of who is on the Nominating Committee at the regional level. Patient representatives do not attend or may not be aware of regional meetings, so it would be difficult to encourage them to be part of a Nominating Committee or a to become Regional Representative. There should be some standardization of this across all regions and perhaps adding the issue as a standing agenda item to be discussed by the Committees.

Any ideas to improve the process to lead to more equal representation, such as making the process more standardized, are welcome. It might be useful for the Nominating Committee of each region to know what demographics are needed for better coordination across the OPTN. One downside of the regional representation model itself is that it leads to the idea of electing a regional representative for the region's particular interest, and results in a physician-driven regional councillorship. Early collaboration across the regions during the selection process could facilitate different results.

One Committee Member suggested keeping a database of previous applicants with their qualifications and expertise to keep in mind for future position openings. It was clarified that there is an ongoing database, so there is a way to identify good candidates from the database.

A decision will need to be made in the next week regarding the future of the regional meetings and whether the next cycle of meetings will continue to be virtual or move to in-person.

The meeting adjourned.
Attendance

- **Committee Members**
  - Matthew Cooper, Chair
  - Amishi Desai
  - Joseph Hillenburg
  - Maryl Johnson
  - Mindy Dison
  - David Mulligan
  - Patrick Healey
  - Sue Dunn
  - Suzanne Conrad
  - Valinda Jones
  - William Hildebrand
  - Brian Shepard, UNOS (Ex-Officio)
  - Chris McLaughlin, HRSA (Ex-Officio)

- **UNOS Staff**
  - Anna Wall
  - Betsy Gans
  - Chelsea Haynes
  - Ross Walton
  - Sally Aungier
  - Tina Rhoades

- **Other Attendees**
  - Adam Frank
  - Alexandra Glazier
  - Atsushi Yoshida
  - Bhargav Mistry
  - Ed Hollinger
  - Emily Blumberg
  - Ginny McBride
  - Jeff Orlowski
  - Jerry McCauley
  - Jonathan Fridell
  - Leona Kim-Schluger
  - Michael Moritz
  - Nikole Hayde
  - Reginald Gohh
  - William Bry