

Meeting Summary

OPTN Transplant Administrators Committee Meeting Summary July 28, 2021 Conference Call

Nancy Metzler, Chair Susan Zylicz, MHA, BSN, RN, CCTC, Vice Chair

Introduction

The OPTN Transplant Administrators Committee (TAC) met via Citrix GoToMeeting teleconference on 07/28/2021 to discuss the following agenda items:

- 1. Welcome and Updates
- 2. Kidney & Pancreas Allocation Update
- 3. Membership Education Project

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

1. Welcome and Updates

Summary of discussion:

The members were invited to join the Fiscal Impact Workgroup. This Workgroup is tasked with evaluating the fiscal impact of public comment proposals on members. The members were encouraged to email their UNOS support team if interested.

The Chair welcomed the new visiting board member to the Committee.

2. Kidney & Pancreas Allocation Update

The Immediate Past Chair of the Kidney Transplantation Committee provided an overview of the three-month monitoring report following the removal of donor service area (DSA) from kidney allocation.

Summary of discussion:

Implemented on March 15, 2021, the intention of removing DSA from kidney allocation was to increase sharing. DSA and region were replaced with a 250 nautical mile (NM) circle around the donor hospital as a unit for determining proximity points for allocation.

The two eras compared in the report are pre-implementation (January 15, 2021- March 14, 2021) and post-implementation (March 15, 2021- May 14, 2021). It was noted that the current and available data does not show any concerning trends. The report includes the following findings:

- Waitlist additions have similar volumes between the two eras
- Average number of weekly deceased donor kidney transplants as well as the average number of weekly kidney-pancreas transplants increased in the post-implementation era
- Average number of transplants across all age groups, particularly pediatrics, increased

- Average weekly number of transplants to most racial ethnic groups increased, with Hispanic and Black recipient populations having a larger increase
- All calculated panel reactive antibody (CPRA) groups remained stable or increased in transplant volume, with CPRA 80-98% having the largest average increase
- Average weekly increase in transplant volume for all dialysis groups except candidates on dialysis 1-2 years, with the largest increase evident in those with 6-10 years on dialysis at listing
- More transplants are occurring outside of the donor DSA
- Discard rates are overall decreasing but there is no significant change to the discard rate by kidney donor profile index (KDPI)

The Chair commented that when this policy was implemented, there were operational challenges relating to matching and the amount of blood requested. She noted this seems to no longer be a common issue. The Kidney Committee member commented that there were process challenges associated with transplant programs establishing relationships with new organ procurement organizations (OPOs) and this will continue to resolve with time.

3. Membership Education Project

UNOS Member Quality staff provided an overview of a membership education project to develop resources that would improve or support their application experience.

Summary of discussion:

UNOS Member Quality staff shared that the goal of this project is to create additional resources to support members when completing applications. She noted that most members need some type of help during the application process so Member Quality is requesting feedback to determine what resources might proactively assist members. She also commented that there have been recent improvements to better align the applications with the bylaws and moving the applications online.

A survey was administered to collect feedback from TAC members prior to the meeting. The UNOS Member Quality staff reviewed the results and solicited additional feedback from the members.

UNOS Member Quality staff shared that most members find completing the log for the key personnel applications difficult. She shared there are updates to how the log can be submitted as well as the creation of a log guidance document underway.

The Vice Chair commented that physicians coming from other programs may not have good records and retrieving this information can be difficult. Another member agreed and commented that medical physicians do not maintain logs unless they are told they will be moving into a primary role. She commented that completing logs requires a lot of manual pulling of information. A member commented that if logs already exist from previous applications, it would be helpful to use what is available as a starting point.

UNOS Member Quality staff asked if encouraging or educating physicians and surgeons to maintain their own logs would be a reasonable approach. A member raised a concern that education still may not achieve the goal. Another member commented that the physician or surgeon may still rely on the transplant program staff to maintain the log for them. The Chair noted that physicians and surgeons may be discouraged from keeping their own patient logs due to HIPAA and privacy concerns.

UNOS Member Quality staff commented that programs are able to request their own previously submitted applications and can share that information with the other program. This may be helpful when the primary is moving programs. A member commented that members should be made aware that this is possible as part of the training resources. The Vice Chair commented that having one

program request information to share with the other program still adds administrative burden to the first program. The Chair asked why UNOS is not able to apply the same information to another application. UNOS Member Quality staff agreed to look into the constraints around this process such as privacy concerns and required signatures.

UNOS Member Quality staff asked the member to provide feedback relating to issues they encounter when completing an application. A member commented that medical physicians do their procurement observations during their fellowships and may not have accurate records. She asked if the records of who is in the operating room (OR) during a procurement could be added to UNetSM to help maintain observation records. UNOS Member Quality staff commented that current reporting does not list all roles of those in the OR so this data may not be readily accessible but agreed to research further.

A member commented that there have been issues with key personnel maintaining procurement observation logs who are not on a fellowship track. Another member commented that there were issues relating to COVID when trying to complete observations as OR access was limited. She continued that some ORs are now equipped with recording equipment and suggested considering allowing the viewing of a recorded procurement as an observation.

UNOS Member Quality staff commented that succession planning is important to ensure bylaw requirements are met if key personnel unexpectedly leaves. She asked the members to respond to how succession planning could be encouraged. A member commented that someone filling a key personnel role at her program unexpectedly passed away which led their program to develop a process. The Chair recommended that Member Quality create a succession planning guidance document.

Next steps:

The members were encouraged to provide additional feedback and suggestions to membershiprequests@unos.org.

Upcoming Meetings

- August 25, 2021
- September 10, 2021

Attendance

• Committee Members

- Denise Neal
- o Deonna Moore
- o Erica Seasor
- Jason Huff
- o Joshua Gossett
- o Kim Rallis
- o Kimberly Rallis
- o Laura O'Melia
- o Megan Fairbank
- o Melissa Roberts
- o Michelle James
- Nancy Metzler
- o Rachel Hatmon
- Scott Wansley
- o Stephanie Johnson
- o Susan Zylicz

UNOS Staff

- o Amanda Robinson
- o Angel Carroll
- o Kaitlin Swanner
- o Kayla Temple
- o Lindsay Larkin
- o Olivia Taylor
- o Roger Vacovsky
- o Sandy Miller
- Sarah Konigsburg

• HRSA Representatives

- o Raelene Skerda
- o Vanessa Arriola

• Other Attendees

o Vincent Casingal