# OPTN Board of Directors Meeting Summary April 24, 2024 Webex

## Dianne LaPointe Rudow, ANP-BC, DNP, FAAN, President Richard Formica, MD, Vice President

### Introduction

The Board of Directors met via Webex on 04/24/2024 to discuss the following agenda items and public comment items:

- 1. Offer Acceptance Collaborative
- 2. Updates from the President
  - a. Code of Conduct Work Group
  - b. Prioritization Work Group
  - c. Expeditious Task Force
- 3. OPTN Independence
- 4. Membership & Professional Standards Committee and Peer Review

The following is a summary of the Board of Directors discussion.

#### 1. Offer Acceptance Collaborative

Contractor staff presented on the offer acceptance collaborative that was recently hosted by the OPTN. They shared how offer acceptance practices impact the transplant system, how the OPTN identified gaps in practices, and shared opportunities and tools for improvement with the community. They shared that there was wide interest in the collaborative throughout the OPTN community and shared how diverse the collaborative cohort was.

Contractor staff presented the improvement guide that was shared with the cohort and shared the metrics that were analyzed throughout the collaborative. They shared that the OPTN analyzed outcome measures including offer acceptance rates and offer acceptance rate ratios, balancing measures including transplant numbers, and engagement feedback.

Contractor staff shared that the goal of the collaborative improvement was to increase offer acceptance rates during the active engagement period compared to the pre-engagement period. Contractor staff detailed the event that was held for the community on the collaborative and shared the resources available to the community. Staff noted that the key drivers of improvement are:

- 1. Defining and revising acceptance criteria
- 2. Optimizing the response to organ offers
- 3. Performing retrospective reviews
- 4. Strengthening waitlist management processes

Contractor staff shared the improvement projects performed throughout the collaborative and shared the collaborative engagement activities that were available throughout the event. Contractor staff noted that coaching was available to cohort participants through the resources provided.

Contractor staff shared the results of the collaborative and highlighted the results of the metrics of offer acceptance rates, transplant numbers, and offer acceptance ratios. Contractor staff concluded the presentation by sharing the resources and benefits that each participating member has access to. Contractor staff emphasized how these practices can be used on a broader scale throughout the transplant community to drive community improvement.

### Summary of Discussion:

The Board discussed coaching available to members after the collaborative, and contractor staff explained that only offer filter coaching is available and the Organ Center may be a potential resource to provide coaching on these practices. The Board discussed how participants of the collaborative could help coach other members throughout the community to adopt the practices they learned.

### 2. Updates from the President

Dr. LaPointe Rudow shared multiple updates with the Board of Directors.

### Code of Conduct Work Group:

Dr. LaPointe Rudow presented an update on the Code of Conduct Work Group. She shared that the final version of the proposal to Establish Code of Conduct and Whistleblower Protection Bylaws was approved by the Executive Committee and will be available for special public comment until May 17, 2024. Dr. LaPointe Rudow noted that a webinar will be held for the community to answer any questions members may have on the proposal. Dr. LaPointe Rudow highlighted the specifics within the proposal and encouraged the Board to participate in special public comment. She shared that the Board would consider the proposal with post-public comment changes in June 2024.

### Summary of Discussion:

There were no comments or questions from the Board.

#### Prioritization Work Group:

Dr. LaPointe Rudow presented an update on the Prioritization Work Group. She shared that the efforts of the work group have focused on prioritization in four key areas: strategic plan alignment, early prioritization prior to the Policy Oversight Committee's (POC) review, idea generation and submission, and roles. Dr. LaPointe Rudow shared that the work group has focused on process design and modifications to ensure the prioritization process is transparent and comprehensive to the community.

Andrea Tietjen, Chair of the Prioritization Work Group, commented on the work group's efforts, and noted that throughout their work, the group has emphasized the importance of considering resource tracking throughout the prioritization process to ensure all projects are resourced efficiently.

### Summary of Discussion:

There were no comments or questions from the Board.

#### Expeditious Task Force:

Dr. LaPointe Rudow shared an update on the work of the Expeditious Task Force with the Board. She shared that the initiatives of the task force have focused on six main areas of work: transplant growth collaboration, non-use study, rescue pathways, patient empowerment, quality improvement and education, and removing barriers to transplant. Dr. LaPointe Rudow highlighted the efforts of the transplant growth collaboration and shared how the first transplant growth collaboration event went, the outcomes of the meeting, and what the task force hopes to improve upon in the future.

Dr. LaPointe Rudow presented an overview of the late declines project from the task force. She shared that the group is currently working to achieve a better understanding of late declines to develop policy. She shared that during phase 1 of the project, the task force plans to collect information on late declines to design the later phases of the project. Dr. LaPointe Rudow shared that the goal of this work is to implement OPTN policy definitions into OPTN policy and corresponding programing, to track and analyze the frequency of late declines.

Dr. LaPointe Rudow presented the cost associated with the work of the task force. She stated that the task force will need the support of the OPTN contractor and HRSA to continue their work in the future.

### Summary of Discussion:

Multiple Board members agreed that the work of the task force is important to continue. A Board member suggested that the OPTN consider a shift in cost and eliminate costs elsewhere to support the efforts of the task force.

### Inquiry from the Office of the Inspector General:

A representative from HRSA asked to share an update with the Board about an inquiry that some OPTN members have received from the Office of the Inspector General (OIG) at their member institutions. They shared that the inspector general is currently investigating the role of patient selection criteria to ensure equitable access to transplant.

### Summary of Discussion:

Board members shared feedback with HRSA on the approach taken for this inquiry. The Board voiced their concern that members were receiving this inquiry through different positions at their institution and there was no standardized contact. Board members were also concerned about some of the information they are requesting and were concerned with sharing sensitive patient identifiable information (PII). Board members shared feedback on how this inquiry can be communicated effectively to the transplant community.

### 3. OPTN Independence

Dr. LaPointe Rudow shared that the Service Design Collective and a subset of Board members has been coordinating with HRSA on to incorporate the OPTN as a legal entity. Dr. LaPointe Rudow stated that incorporating the OPTN will provide legal liability and peer review protections to the OPTN. She also shared that a group of Board members have been working to establish corporate bylaws for a new OPTN. Dr. LaPointe Rudow stated that this subset of Board members are applying for the OPTN to be recognized as a tax exempt 501 (c)(3). She explained that the OPTN does not currently have legal consultants advising the OPTN Board itself, however, HRSA has permitted the OPTN Board to hire their own independent lawyer, and they have agreed to allow the Board to hire a new interim Executive Director.

Dr. LaPointe Rudow shared that the Service Design Collective estimates that the OPTN will be an independent entity in June 2024. Dr. LaPointe Rudow shared that there are ongoing conversations that must take place about the financials of the OPTN, the Board Support Contractor, and how the Board will interact with other OPTN contractors.

### 4. Membership & Professional Standards Committee and Peer Review

Dr. Maureen McBride, OPTN Executive Director, shared background on the Membership & Professional Standards Committee (MPSC) peer review process and the history of the process. She shared how the peer review process is conducted and how the confidentiality of the peer review process is integral to

the integrity of the procedure. Dr. McBride addressed questions received from Board members recently on why the Board is not more involved in the peer review process and why the MPSC conducts these reviews confidentially, without the Board's input, unless they are asked to make a formal decision. Dr. McBride shared that the peer review process is kept strictly confidential to everyone, including the Board to ensure the integrity of the process and to ensure there are no biased opinions in the chance that the Board is asked to make a decision on a members' membership status.

The Board discussed events that must be reported to HRSA by the OPTN, and the OPTN President asked that these reported events be in writing and accessible to the Board. Dr. McBride shared that she planned to share this information with the Executive Committee and that they could consider directing the contractor to change the practice regarding whom is notified. Dr. McBride agreed to bring more updates back to the Board once there have been more conversations about the process with the Executive Committee.

#### **Upcoming Meetings**

- May 28, 2024
- June 12, 2024
- June 17 & 18, 2024

#### Attendance

- Board Members
  - o Alan Langnas
  - o Andrea Tietjen
  - o Andrew Kao
  - o Barry Massa
  - o Christopher Jones
  - Christopher Woody
  - Colleen McCarthy
  - o Daniel Yip
  - o Dianne LaPointe Rudow
  - o Emily Blumberg
  - o Evelyn Hsu
  - o George Surratt
  - o Ginny McBride
  - o Jen Lau
  - o Jerry McCauley
  - o Jim Sharrock
  - o Julie Spear
  - o Kelley Hitchman
  - o Laura Butler
  - o Laurel Avery
  - o Linda Cendales
  - Lloyd Ratner
  - o Luis Hidalgo
  - o Manish Gandhi
  - o Maryjane Farr
  - o Meg Rogers
  - o Melissa McQueen
  - o Michael Kwan
  - o Nicole Hayde
  - o Rich Formica
  - o Silas Norman
  - o Stefan Tullius
  - o Stuart Sweet
  - Valinda Jones
  - Wendy Garrison

#### • HRSA Representatives

- Adrienne Goodrich-Doctor
- o Aite Aigbe
- Chris McLaughlin
- o Frank Holloman
- o Jennifer Brock
- UNOS Staff
  - o Anna Messmer
  - o Beth Overacre
  - o Dale Smith

- o Jacqui O'Keefe
- o James Alcorn
- o Julie Nolan
- o Liz Robbins Callahan
- o Maureen McBride
- o Morgan Jupe
- o Roger Brown
- o Susie Sprinson