

**OPTN Operations and Safety Committee  
Match Run Rules Workgroup  
Meeting Summary  
September 15, 2022  
Conference Call**

**Jill Campell, BSN, RN, CPTC, Chair**

## **Introduction**

The Match Run Rules Workgroup (the Workgroup) met via Citrix GoToMeeting teleconference on 09/15/2022 to discuss the following agenda items:

1. Public Comment Preview
2. Discussion: Potential Next Steps

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

### **1. Public Comment Preview**

The Workgroup reviewed feedback to date on their concept paper *Redefine Provisional Yes and the Approach to Organ Offers*.

#### Data summary:

The concept paper outlines a tiered structure for organ offers that will contain requirements to be performed by transplant programs receiving the offer.

Preliminary public comment themes:

- Support improving efficiency within the system
- Tiered framework is complex in nature; similar to current practice
- Tier III has potential to become new provisional yes
- Concern framework increases staff burden
- Increasing usage of offer filters should be the first step
- Time limit on offers seems prolonged
- Considerations for late turndowns
- Support for having a more automated system

#### Summary of discussion:

A member reported that this feedback was very similar to what they heard at their regional meeting presentation, especially around support for a more automated system and the fear of tier III becoming the new provisional yes. They added that there was ambiguity felt by attendees surrounding how these requirements would be enforced.

A second member reinforced the theme that attendees at their meeting felt like this concept would increase program workload without significant benefit; she agreed with the previous member that attendees were confused about compliance monitoring. The Chair of the Operations and Safety Committee suggested having site survey request information about patients who had a refusal code input after previously accepting the offer.

The member said that there had been specific feedback that programs in that region were not transplanting off of only virtual crossmatches; they all required physical, which a longer wait before results were returned. The Chair of the Committee wondered if the Committee should use the number of programs using virtual crossmatching to inform the amount of time allowed at that tier, and suggested that more programs should consider using them.

The Chair of the Workgroup agreed with the sentiment expressed before her, and felt that there was strong support from the community for examining the intersection between redefining provisional yes and offer filters. Many community members felt that the approach should be to increase system efficiency rather than restructure the rules. Programs also felt that receiving a tier III offer would carry some of the same problems as provisional yes: with an unknown amount of time between the initial and primary offer, programs do not know how urgently to prepare or the likelihood of receiving the offer at a higher tier. They added that offer filters gave programs a more flexible and dynamic method of receiving offer more quickly. The Chair of the Committee pointed out that programs objecting to the inflexibility and unknown of existing provisional yes responses should in theory be appreciative of offer filters.

Additionally, the Chair of the Workgroup suggested that one theme that could be considered that they felt was brought up frequently was consistency in Organ Procurement Organization (OPO) practice. She heard frequently that an area for system improvement could be to provide guidance for OPO practice or to create automated processes that OPOs can use to standardize practice. The Chair of the Committee wondered if that should be a theme for the Workgroup: standardizing practice in allocation. They proposed that, if the community is not in favor of the concept paper, the Workgroup could focus on efficiency in offers rather than system redesign. The Chair of the Workgroup and multiple members were in favor of this approach.

#### Next steps:

The Workgroup will review previous discussions related to system enhancements and identify tools that could be further considered/developed.

## **2. Discussion: Potential Next Steps**

IT Staff and PCR Staff presented on possible options for the Workgroup.

#### Data summary:

Staff presented on considerations brought up from previous workgroup discussions, and gave a brief description of their feasibility:

- Visibility where TXC falls on match run
- Program level alerts
- Allow TXC to indicate in OPTN Donor Data and Matching System when they need more information to evaluate a donor
- Organ offer notification limit efficiencies
- Dashboard (visibility into MOT)
- Primary/back up notifications

The following recommendations were submitted by members about the proposed dashboard:

- Provide more detail about cross clamp timing
- Be able to view more than three donor offers

- Be able to split the OPTN Donor Data and Matching System into two screens showing all offers currently being allocated and specific match runs

#### Summary of discussion:

A member supported the development of a dashboard to have more visibility on match runs for multi-visceral combinations.

A second member expressed hesitancy over allowing transplant programs to view the refusal reasons that other programs have input; they suggested that this may lead to programs refusing based solely on other programs' responses. The Chair noted that, at present, in the mobile version of the OPTN Donor Data and Matching System, there is visibility into the refusal reasons input by other programs. They felt that this provided useful information for highlights that were included in the donor attachments field.

Another member was in favor of "as much automation as possible" for OPOs. In the match run's current state, they felt, there were too many manual processes.

It was also suggested that there should be a more binding "backup acceptance" code to encourage programs to take backup offers after the primary offer more seriously. A member also supported that this change, on a kidney match run, not be bound to choosing laterality, as that information often is not known until after cross clamp. They also added that a more binding backup offer would be helpful, since, anecdotally, they felt that around 40% of their primary acceptances are then refused just before, during, or after cross clamp.

A member suggested that, instead of the OPTN Donor Data and Matching System showing the last three donors and having the program manually choose to view the last five days of offers, the last five days of offers be shown by default. They also requested that any dashboard that is developed show the operating room timing for each donor.

The Chair of the Committee suggested there may be two problems to consider: what are enhancement opportunities for the match run, and what are enforcement opportunities for programs that do not follow policy. They considered that automation may fall under both categories.

A member supported the increased automation, especially for offer filters, noting that many programs are already overburdened and have begun using third-party answering services. They felt that these services were not very effective and were a consequence of programs feeling overburdened, which could be relieved by the effective use of offer filters.

#### Next steps:

Staff will distribute the list of optimization considerations for the Workgroup to consider and identify the most useful options.

#### **Upcoming Meetings**

- October 20, 2022
- October 27, 2022 (OSC in-person)

## Attendance

- **Workgroup Members**
  - Jill Campbell
  - Katherine Audette
  - Doug Butler
  - Alden Doyle
  - Catherine Kling
  - Kimberly Koontz
  - Sharyn Sawczak
  - Stacy Sexton
  - John Stalbaum
- **HRSA Representatives**
  - Marilyn Levi
- **UNOS Staff**
  - Sally Aungier
  - Betsy Gans
  - Isaac Hager
  - Krissy Laurie
  - Carlos Martinez
  - Kerrie Masten
  - Alan Nicholas
  - Sharon Shepherd
  - Joann White