OPTN Operations and Safety Committee
Meeting Summary
March 24, 2022
Conference Call

Chris Curran, CPTC, CTBS, CTOP, Chair
Alden Doyle, MD, MPH, Vice-Chair

Introduction
The Operations and Safety Committee (the Committee) met via Citrix GoToMeeting teleconference on 03/24/2022 to discuss the following agenda items:

1. Reminders/Updates
2. Project Update: Provisional Yes
3. Project Update: Mandatory Offer Filters
4. Update: ABO Monitoring Report

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

1. Reminders/Updates

The Committee reviewed the rescheduling of their upcoming in person meeting and heard a presentation from IT Staff on match run transparency.

In Person Meeting Scheduling
The in-person Committee meeting will be rescheduled for either May 6, May 13, or May 20.

Match Run Transparency

Data summary:
Key problem: programs on a match run cannot tell what their relative rank of a candidate is due to a lack of transparency about how many programs exist between their candidate and the primary.

IT Staff has moved forward with exposing the transplant center code of programs on a match run. This will not reveal patient identifying information.

Summary of discussion:
A member asked whether this “unblinding” was necessary, noting that during the offer process, it is typical for OPOs to reveal how many programs are ahead of another. The Chair responded that, on the mobile version of DonorNetSM, there is already a feature to that details how many programs are ahead of another. This would extend that transparency to the desktop version of DonorNetSM as well as increase match transparency overall.

A member expressed concern that this would enable programs to accept early on in a match run, knowing that if they decline late enough, the next program will be unable to receive the organ; in this instance, the original program could have a better chance of having the offer return to them. The Vice-Chair noted that this would still enable other programs to identify those programs that are not following allocation protocol. The Chair replied that, while the increased transparency to ensure allocation is
overseen by other programs is nice, the primary objective is to provide more information for backup programs.

It was also speculated that compliance will be less of an issue once the system becomes more transparent, as part of the reason for noncompliance is a lack of transparency and inefficiency. The Committee agreed with this perspective.

Staff added that this change is a relatively low-effort part of a larger series of changes intended to increase match run transparency and efficiency. The reason this is being previewed ahead of all else is because it is feasible to implement it as early as the summer if there is support for it. They also posed the question how should the quantitative impact of the change be monitored.

A member proposed that fewer late turndowns could be a sign that the changes are having an impact. Another member added that the overall allocation duration could also be measured to see if it decreases post-implementation. They stated this could come both from the knowledge that they were being watched, as well as the ability to better prepare for an offer with the knowledge of how far away it is.

Next steps:

The Committee will reply with their availability for in-person meetings. Staff will present at the Transplant Management Forum on April 11. Feedback will be brought back to the Match Run Rules Workgroup.

2. Project Update: Provisional Yes

The Committee reviewed progress to date from their Workgroup redefining provisional yes.

Data summary:

The Match Run Rules Workgroup is charged with improving processes to increase the efficiency of the organ offer, review, and acceptance system and reduce overall organ allocation time. The Workgroup has determined this can be broken into four specific tasks:

- Redefine provisional yes and associated member responsibilities
- Review and consider number of organ offers sent
- Modify organ offer time limits with system enforcement
- Modify organ offer notifications

Summary of discussion:

A member noted that accountability is at the forefront of organ allocation, and, in the process of allocation, patients are not just trusting their life to their transplant program, but to all programs evaluating the offer efficiently. A member also supported having a split between program specific responsibilities and candidate responsibilities.

The Vice-Chair wondered whether the terminology needs to be changed for provisional yes, as it may be a loaded term. There was support from the Committee for “Tier I/II/III offer”.

Staff provided the update that, when meeting in person, the Committee will divide into groups to address specific areas of reworking the offer system.

Next steps:

The Workgroup will consider the Committee feedback.
3. Project Update: Mandatory Offer Filters

The Committee reviewed the progress to date on their Workgroup’s efforts for the Mandatory Usage of Offer Filters.

Data summary:

**Offer Filters Data**

- 126 transplant programs granted access to Offer Filters Manager
- 168 programs accessed Offer Filters Explorer
- 62 programs enabled at least one filter
- 75% of transplant programs have 5 or fewer filters
- 590,608 offers have been bypassed (13.2% of all offers)

Summary of discussion:

The Vice-Chair suggested that a potential intermediary point between voluntary offer filters and mandatory ones could be to require an attestation from programs that they have reviewed and considered the usage of offer filters. This approach would not require programs to use the offer filters but would indicate that they have reviewed the data and considered their usage.

It was also asked whether the data could be stratified by both program size, as well as adult and pediatric center usage. Both the Vice-Chair and a member were curious if offer filters affected small and large programs differently.

Another proposed option for the group would be to distribute an educational document instead of creating a policy proposal to ensure programs have adequate information to use offer filters correctly.

A member suggested that it could be helpful to send a report to programs without offer filters enabled that shows how many offers could have been filtered with the recommended set of filters. A second member added that having programs that are effectively using offer filters talk to programs that are not using them could also be helpful.

Next steps:

The Mandatory Usage of Offer Filters Workgroup will consider Committee feedback. In addition, they will continue to review current offer filters data.

4. Update: ABO Monitoring Report

This agenda item was not discussed.

Upcoming Meetings

- April 28, 2022
- May 26, 2022
- June 23, 2022
Attendance

- **Committee Members**
  - Chris Curran
  - Alden Doyle
  - Dominic Adorno
  - Katherine Audette
  - Andrew Bonham
  - Steven Johnson
  - Audrey Kleet
  - Kimberly Koontz
  - Stephanie Little
  - Melinda Locklear
  - Renee Morgan
  - Rich Rothweiler
  - Susan Stockemer
  - Charles Strom

- **HRSA Representatives**
  - Vanessa Arriola
  - Jim Bowman
  - Marilyn Levi

- **UNOS Staff**
  - Bonnie Felice
  - Charles Fenderson
  - Robert Hunter
  - Courtney Jett
  - Kerrie Masten
  - Lauren Mauk
  - Elizabeth Miller
  - Brittany Shean
  - Joann White