

OPTN Offer Acceptance Collaborative Improvement Guide



OPTN *Collaborative Improvement*

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Introduction

This Improvement Guide has been developed to support the Organ Procurement and Transplantation Network (OPTN) Offer Acceptance Collaborative, which seeks to share effective practices related to offer acceptance. Offer acceptance processes are integral to the donation and transplant system, and effective practices in this area can lead to increased transplants. There is, however, considerable variation in offer acceptance rates for transplant hospitals across the nation. Addressing this variability at both the individual program and community level may increase system efficiencies. This project also aims to foster improvement efforts via a collaborative framework, and encourage organizational learning and community sharing to drive improvement.

Organizations who were identified as having effective acceptance practices provided input and understanding of key drivers to success in this area. The Improvement Guide reflects these drivers:

- **Defining and Revising Acceptance Criteria**
- **Optimizing the Response to Organ Offers**
- **Performing Retrospective Reviews**
- **Strengthening Waitlist Management Processes**

While these are not the only drivers that may impact offer acceptance processes, they emerged as important contributors to efficient acceptance practices. To best utilize the interventions identified in this Improvement Guide, programs should ...

1. **Examine your process.** Identify the key roles and responsibilities in the process from listing a patient on the Waitlist to determining a final offer acceptance. Host and facilitate a process mapping session, document work processes, and validate them with the team.
2. **Identify opportunities for improvement.** Analyze process maps to look for ambiguous or problem areas. Review the baseline data – what information indicates an area for improvement?
3. **Plan small tests of change.** Use the interventions to identify the changes best suited for your organization to test. It is best practice to start with small tests of change. For example, draft and test a protocol with one person in one setting. Write down questions you want to answer, and collect data through process measures or observation.
4. **Test changes and analyze results.** What was learned from the tested intervention? Decide to adapt, adopt, or abandon the change. Continue testing and use analyses to determine whether the changes or interventions are resulting in improvements in the desired area.
5. **Implement improvements.** When ready, develop a plan for implementing a tested, proven change within your transplant program. Decide who will be responsible for communicating, tracking, and ensuring sustainability of improvement.

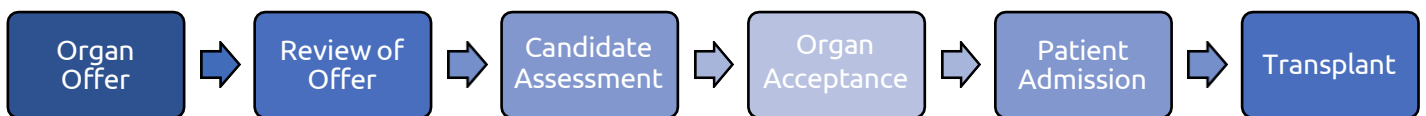
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Organ Offer and Acceptance Process

Organ Offer and Acceptance processes focus on maintaining up-to-date candidate and donor selection criteria as well as the decision-making methods used when a transplant program is provided with an organ offer. Roles and responsibilities within the transplant programs associated with these work processes include, but are not limited to, primary call personnel, procurement coordinators, pre-transplant coordinators, physicians, and surgeons.

There are many aspects of programs' organ offer and acceptance practices that may benefit from improvement. Prior to embarking on an improvement project, it is important to review your processes in detail to consider areas that may warrant interventions. The Plan-Do-Study-Act approach encourages the introduction of small rapid tests of change. Therefore, identifying specific improvement areas to address is vital to success.

The diagram below illustrates the high-level components of an offer acceptance process, as identified for this improvement guide.



Each program is encouraged to map their team's processes to understand the current approach and identify areas of inefficiency or other non-value added work. Use a multi-disciplinary team to decide where to focus improvements and develop your change implementation strategy. Review the recommended actions contained within the Improvement Guide to help facilitate your changes.

Organ Offer and Acceptance Interventions



Define and Revise Acceptance Criteria

Defining and revising acceptance criteria are integral components of efficient offer acceptance practices. Ensuring current acceptance criteria at both the program and candidate levels may lead to broadened and/or targeted organ offers.



Recommended actions:

1. Define acceptance parameters specific to each organ type.
2. Define standardized donor rule-in and rule-out clinical criteria and revisit criteria regularly. Consider heart catheter parameters, kidney biopsies or pump parameters, organ size/weight, etc.
3. Evaluate utilization analysis/trends (i.e., retrospective review of organ offers) to drive changes to acceptance practices.
4. Involve key stakeholders when determining acceptable criteria and ensure buy-in from all team members.
5. Identify, periodically review, and update donor acceptance criteria per candidate to ensure listing accuracy.



Suggested measures:

- Acceptance criteria variance
- Median time from offer to acceptance/refusal
- Adherence to rule-in and rule-out criteria
- Percent adherence to perfusion protocol

Organ Offer and Acceptance Interventions



Optimize Response to Organ Offers - Staff Structure and Availability

Effective transplant teams maintain a refined process to identify which staff members/roles are essential in the organ offer and acceptance process. Establishing clear, defined roles and responsibilities helps to ensure that critical transplant staff are available and able to respond to organ offers in a timely manner.



Recommended actions:

1. Establish a multidisciplinary team to determine a comprehensive staffing structure. Be sure to include representation from all key areas in the decision-making process.
2. Develop a coverage plan to address contingencies such as staff illnesses or off-hour organ offers.
3. Perform simulations of the process to ensure all integral staff are included and understand their roles.
4. Develop a schedule for on-going educational competencies and utilize knowledge validation to ensure consistency of practice.



Suggested measures:

- Acceptance/decline rates related to staffing
- Acceptance/decline rates regarding OR availability
- Acceptance/decline rate on weekends
- Frequency of refusal code 762, “Recovery team availability” and 763, “Transplant team or transplant facility availability”

Organ Offer and Acceptance Interventions

Optimize Response to Organ Offers - Timely Response

Timely and accurate responses to offers help increase efficiency of the system, build positive relationships with OPOs, and can potentially decrease cold ischemic time.

Recommended actions:

1. Set a goal for response times and review compliance regularly.
2. Establish a designated person/role to communicate organ offers to other pertinent team members.
3. Establish a designated person/role to coordinate the team's needs to efficiently evaluate each organ offer.
4. Create a standardized checklist of steps and required elements upon receipt of a new organ offer.

Suggested measures:

- Median time from offer to acceptance/refusal
- Use and accuracy of communication templates
- Number of refusals with code 765, "Exceeded policy defined response time"

Organ Offer and Acceptance Interventions



Perform a Retrospective Review

As a team, review the dispositions of organs offered to your program at regular intervals. Review accepted organs, declined organs, and the rationale behind those decisions. This review can validate current decision-making processes, assist with action plan development if needed, and provide support for any acceptance process modifications. This review can also help identify missed opportunities and potentially expand acceptance criteria and practices.



Recommended actions:

1. Determine staffing attendance and meeting cadences for case reviews based on the team's needs.
2. Review offer/organ acceptances and turndowns in partnership with your OPO.
3. Utilize the Organ Offers Report (ROO) visual analytic, as well as the Report of Organ Offers Outcomes Report to assist in the review process.
4. Develop consensus on standard approaches for offer acceptance practices and adjust processes as needed.
5. Review action plans and any acceptance practice modifications at subsequent review meetings.
6. Promote open and consistent communication between the OPO and transplant program.



Suggested measures:

- Track acceptance and declined organ offer trends, such as by provider, day of the week, etc
- Track organ offer decline reasons and circumstances
- Measure the number of organs your program declined that were subsequently transplanted
- Track the progress of action plans and any process modifications.

Organ Offer and Acceptance Interventions

Strengthen Waitlist Management Processes

Keeping a waitlist current and up-to-date can be a challenging. In order to ensure patients are ready for transplant, it is imperative to maintain accurate and current information on each individual candidate. Additionally, establishing re-evaluation and delisting criteria will greatly contribute to candidate readiness and effective waitlist management.

Recommended actions:

1. Ensure each candidate is listed with appropriate donor acceptance criteria.
2. Ensure patients likely to receive an offer are maintained at a ready state for transplant.
3. Periodically review candidates to ensure clinical listing elements are current, including donor acceptance criteria.
4. Review candidates with certain refusal codes, such as 720 “candidate temporarily medically unsuitable”, or 722 “Candidate’s condition improved, transplant not needed”, to assess accuracy of candidate status and modify as needed.
5. Review status 7 (Waitlist inactivity) listings at established intervals and update as indicated.
6. Create protocols for re-evaluation based on patient characteristics.

Suggested measures:

- Track candidate listing statuses.
- Track number of candidate-specific refusal codes over time.