

OPTN Transplant Coordinators Committee

Meeting Summary

May 16, 2024

Conference Call

Stacy McKean, RN, BSN, MHA, CCTC, Chair
Christine Brenner, RN, BSN, CPTC, CCTC, Vice Chair

Introduction

The OPTN Transplant Coordinators Committee (the Committee) met via Cisco WebEx teleconference on 05/16/2024 to discuss the following agenda items:

1. Operations and Safety Committee Project Review
2. New Project Discussion

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

1. Operations and Safety Committee Project Review

The Vice Chair of the OPTN Operations and Safety Committee (OSC) presented the project *Re-Evaluation of Deceased Donor Testing Requirements* to the Committee for their review and feedback. OSC is seeking feedback on whether there are testing requirements that are outdated or no longer applicable. Specific policies will be reviewed by OSC in addition to conducting a holistic review.

Summary of discussion:

No decisions made, discussion only.

Members asked for clarification of which tests might be asked for in this additional review and was informed that right now it is word of mouth. The Vice Chair sought clarity on which tests might be removed, the Vice Chair of OSC stated that these are early discussions and they are hoping to identify those tests through presentations such as this one. They informed the Committee that the Organ Procurement Organization (OPO) Committee hopes to see timing and repeat tests addressed. The Chair offered that with Chagas and Strongyloides testing requirements, the challenge lies in the required confirmatory testing, especially if it will be required for living donors as well.

The Vice Chair suggested that members consider this question further and consult their home institutions further on tests that are outdated or no longer necessary.

Next steps:

The Committee will engage in further conversation and discussion as the project develops.

2. New Project Discussion

The Committee continued their discussions on policy operationalization standards and addressing the deceased directed donation definition. The Committee also heard a new potential project idea on modifying *Policy 3.7 Waiting Time Modifications*.

Summary of discussion:

No decisions made, discussion only.

Policy Operationalization Standards

The Committee reviewed questions submitted prior to the meeting that are aimed to help identify and improve project implementation during policy development process:

- What tools will OPOs or Transplant Programs need in order to understand the policy requirements? (i.e. webinar explaining policy, FAQ, recommended best practices, etc)
- If there are proposed data collection elements: Is this data that is currently, routinely captured by programs? Is it documented in a discreet field? Can it be easily retrieved for audits or to meet reporting requirements?
- Will there be necessary changes to the EMRs? Or standard EMR workflows?
- Are there specific documentation requirements? If so, is there mandatory or “preferred language” that programs will need to implement/update templates/update consents?
- Are there significant operational changes that will be required for OPOs or Transplant Programs?
- How can OPOs and programs demonstrate compliance?
- Based on the proposed requirements, how many hours are estimated for OPOs and programs to implement? How many hours are estimated (monthly/annually) to maintain compliance?
- Will OPOs or programs require additional staff to support this change?
- Does this create any conflict with CMS regulations and/or other complexities that stand to impact patient care (i.e. with payors – PHS and HBV vax are good examples of this.)
- Will the policy change cause an increase in workload volume or require a change in workflow for transplant programs?
- What resources are/will be available to transplant programs to assist in policy implementation?

Members agreed that these are a good starting point and look to refine the list further. One member brought up their concern that they often find a disconnect between public comment feedback and how a policy is ultimately implemented. They sought clarity on why certain changes or comments are not addressed in final policy language. It was highlighted that the Committees engage in robust discussion of public comment feedback and are the ultimate deciders on what changes or comments merit addressing in the final policy language. The Vice Chair emphasized that what the Committee is currently developing will provide other Committees with more direction for policy rollouts.

It was recommended the Committee develop a checklist, similar to the Data Advisory Committee checklist, that would become part of the policy development process and ensure implementation considerations are taken into account during the development stage.

Deceased Directed Donation

“Directed donation. Nothing in this section shall prohibit the allocation of an organ to a recipient named by those authorized to make the donation.” 42 CFR 121.8(h)

The Committee reviewed the Final Rule language for the definition of a directed donation. The Chair felt that there is still need for clarity with the language as it relates to next of kin. The Vice Chair sought

further information from legal minds on this topic. It was emphasized that the OPTN scope in this instance remains within the scope of the Final Rule as well, and so interpretations of the Uniform Anatomical Gift Act (UAGA) are not within the purview of the discussion.

Policy 3.7 Waiting Time Modifications

The Committee heard an overview of Policy 3.7 and the concerns that have been raised regarding the antiquated requirements, the lack of a streamlined and formal process, and the concern for how it is being measured.

Current policy requirements state that all transplant programs within an OPO must sign the application for waiting time modification. Members agreed that this can create excessive burden on staff and also seems outdated, as a holdover from the DSA days.

The Chair recommended that perhaps the Membership and Professional Standards Committee (MPSC) be more involved in the process, as a means of formalizing it. They also agreed that having the ability to audit how many programs use this forms and whether there are repeat users would be beneficial.

One member brought up that when they've used this form before, it was a lengthy and burdensome effort to get the additional signatures and agreed that removing this could improve the process.

Another member highlighted that though they have not used this form before, any opportunity to streamline and also automate as well as turn documentation digital is good. They expressed frustration with the need for paper forms that still require faxing or sending via secure mail.

The Committee agreed that they would like to continue with this project and look at ways to improve the policy language as well as the process.

Next steps:

The Committee will engage in further conversation and discussion as the projects develop.

Upcoming Meetings

- June 20, 2024
- July 18, 2024

Attendance

- **Committee Members**
 - Amy Olsen
 - Ashley Hamby
 - Heather Bastardi
 - Nancy Rodriguez
 - Kenny Laferriere
 - Rachel White
 - Stacy McKean
 - Christine Brenner
 - Karl Neumann
- **UNOS Staff**
 - Stryker-Ann Vosteen
 - Kim Uccellini
 - Joann White
- **Other Attendees**
 - Eve Cabatan
 - Katherine Meneses
 - Kim Koontz