OPTN Kidney and Pancreas Transplantation Committees
Kidney-Pancreas Continuous Distribution Workgroup
Meeting Summary
January 7, 2022
Conference Call

Rachel Forbes, MD, Chair
Oyedolamu Olaitan, MD, Vice Chair
Martha Pavlakis, MD, Chair
Jim Kim, MD, Vice Chair

Introduction

The Kidney and Pancreas Transplantation Committee Continuous Distribution Workgroup (the Workgroup) met via Citrix GoToMeeting teleconference on 01/07/2022 to discuss the following agenda items:

1. January 2022 Public Comment Update on Continuous Distribution of Kidneys and Pancreata
2. Analytic Hierarchy Process (AHP) Exercise Overview
3. Next Steps

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

1. January 2022 Public Comment Update on Continuous Distribution of Kidneys and Pancreata

The Workgroup reviewed the upcoming Request for Feedback on the Continuous Distribution of Kidneys and Pancreata, to be released in the January 2022 Public Comment cycle.

Data summary:

The Continuous Distribution of Kidneys and Pancreata Request for Feedback will provide an update on the Kidney and Pancreas continuous distribution project

- Provides further detail on the proposed attributes
- Summarizes discussions on each attributes' proposed rating scale shapes
- Gives overview of next steps: weighing attributes against each other
- Asks for community feedback on proposed attributes, rating scale recommendations, and key questions on specific attributes (waiting time, placement efficiency, etc.)

The Request for Feedback will be released simultaneously with a Kidney and a Pancreas/Kidney-Pancreas (KP) allocation AHP exercise.

Summary of discussion:

The Workgroup had no comments or questions.

2. AHP Exercise Overview

Staff presented an overview on the Kidney and Pancreas/KP AHP Exercises, including a walkthrough of the tools and brief summary of plans to analyze, share, and discuss the results.

<u>Data summary:</u>

The AHP tool is a multi-criteria decision making (MCDM) tool that asks participants a series of questions to rank choices upon multiple criteria.. This tool will aid discussions on attribute weights.

The Workgroup has previously developed a list of relevant attributes and categorized them according to specific goals.. The AHP exercise asks participants to make pairwise comparisons, and determine whether attribute A is more, less, or equally as important as attribute B.

Each attribute is phrased in terms of a candidate profile. For example, the participant would compare a pediatric candidate and a prior living donor. Comparing the candidate profiles is more direct and easier to understand than comparing the goal to grant pediatric patients more access and the goal to grant priority to prior living donors. When making these comparisons, the participant should assume that everything else is equal between the two candidates, except those two variables, which are opposite in each candidate. For example, if Candidate A is pediatric and Candidate B is a living donor, it should be assumed that these candidates have the same level of sensitization, same amount of waiting time, are the same distance from the donor hospital, etc. It should also be assumed that candidate A, the pediatric patient, is not a living donor; Candidate B, the prior living donor, is likewise an adult, and not a pediatric patient.

Each pairwise comparison will involve two decisions utilizing a sliding scale of preference between the two options. The first decision is to choose which attribute is more important. The second decision is to choose the intensity of the relative importance of one attribute over the other.

The exercise will include several elements:

- The portfolio goal in the middle of the page discusses the goals related to Kidney or Pancreas/Kidney-Pancreas/Pancreas Islet transplant, depending on the exercise
- The attributes compared can be selected to show more information about the attribute
- The slider allows the participant to indicate relative importance and intensity of importance. Moving the slider causes the text beneath to change, indicating the participant's prioritization choice (moderately more important, extremely more important, etc)
- The participant can also leave comments to explain why candidate A should be prioritized over candidate B (or vice versa). These comments will be helpful to the Workgroup, and it is highly encouraged to share comments and explanations
- A progress marker to show how far along the participant is in the exercise

At the end of the exercise, each participant will receive a chart with their personal results, which expresses their priorities. When the results of the AHP exercise are aggregated, similar charts and analyses will be applied to show differences and similarities in priorities across demographic groups. Results will be compiled and analyzed by location and type of respondent, and are purely advisory to the workgroup. The Committees ultimately have the responsibility for developing the eventual policy proposal and will not be bound by the results of the exercise. NOTA and the Final Rule still govern policy development.

The Patient Affairs Committee and the Organ Procurement Organization (OPO) Committee will review results across their respective demographic groups to provide perspective on why patients or OPO representatives may differ in their values from other demographic groups. The Workgroup and the Kidney and Pancreas Committees will also review and discuss results, and afterwards repeat the exercise.

<u>Summary of discussion:</u>

Staff encouraged Workgroup members to share the AHP exercises with their networks, including patients, colleagues, and organizations.

A member asked if the pairwise comparisons can be skipped, so that the user does not have to choose. Staff responded that comparisons can be skipped, and the software will not default any response to "neutral," so the overall results are not affected. Staff continued the resulting chart will not be as accurate if all the comparisons are not answered.

A Chair remarked that the composition of the participant population can affect the result. If a specific set of stakeholders participate en masse, it could skew the perception of what the community wants. The Chair asked how the results take this into account. Staff explained that the demographic information is utilized in evaluating the AHP data. Trends are reviewed across demographic groups, and the amount of consensus between groups is calculated. Staff continued that the AHP results won't translate directly into the weights going to the Scientific Registry of Transplant Recipients (SRTR) for modeling, and that the Workgroup will have continued discussions. Staff added that the Workgroup will repeat the AHP exercise after reviewing and discussing the result, as this discussion can generate increased consensus.

3. Next Steps

Staff presented an outreach plan for the Kidney and Pancreas Continuous Distribution AHP exercises. The Workgroup reviewed a draft time line of next steps, including upcoming discussions on operational components, such as review boards and waiting time reinstatement, development of the modeling request, and finalizing draft framework.

Summary of discussion:

One Chair asked if a standardized message or email will be available to share for outreach. Staff responded the Workgroup will also receive the outreach emails, and noted that Workgroup member outreach doesn't need to be overly formal. Staff strongly encouraged Workgroup members to share the AHP exercise with their professional colleagues.

There were no additional comments or questions. The meeting was adjourned.

Upcoming Meetings:

- January 21, 2022 – Teleconference

Attendance

- **Workgroup Members**
  - Martha Pavlakis
  - Rachel Forbes
  - Oyedolamu Olaitan
  - Jim Kim
  - Bea Concepcion
  - Cathi Murphey
  - Dave Weimer
  - Elliot Grodstein
  - Lynsey Biondi
  - Pradeep Vaitla
  - Todd Pesavento
  - Warren McKinney
- **HRSA Representatives**
  - Arjun Naik
  - Marilyn Levi
- **SRTR Staff**
  - Ajay Israni
  - Bryn Thompson
  - Grace Lyden
  - Jonathan Miller
- **UNOS Staff**
  - Joann White
  - Lindsay Larkin
  - James Alcorn
  - Lauren Motley
  - Alison Wilhelm
  - Amanda Robinson
  - Anne McPherson
  - Ben Wolford
  - Caitlin Shearer
  - Cole Fox
  - Darby Harris
  - Darren Stewart
  - Kaitlin Swanner
  - Laura Schmitt
  - Melissa Lane
  - Rebecca Marino
  - Ross Walton
  - Sarah Booker
  - Rebecca Brookman
  - Kayla Temple
  - Susan Tlusty
- **Other Attendees**
  - PJ Geraghty